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MAY -8 2011

**EXAMINER** 

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SECRETARY OF STATE TAULAHASSEE, FLORIDA

APR 28 PH 12: 3

## COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: HFI L+d.  Name of Florida Limited Partnership or Limited Liability Limited Partnership				
Name of Florida Limited Partnership or Limited Liability Limited Partnership				
The enclosed Certificate of Amendment and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to:				
Barry Hurwit				
Barry Hurwit  Contact Person  Hurwit Management, Corp.  Firm/Company  1112 Weston Road, #114  Address  Weston, FL 33326  City, State and Zip Code				
Firm/Company				
1112 Weston Road, #114				
Address				
Weston, FL 33326				
City, State and Zip Code				
BHucwit @ Bellsouth. net				
BHurwit @ Bellsouth.net  E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Barry Hurwit at (954) 217-1000				
Barry Hurwit at (954) 217-1000  Name of Contact Person Area Code and Daytime Telephone Number				
Enclosed is a check for the following amount:				
\$52.50 Filing Fee Solution Status Solution Sta				
STREET ADDRESS: MAILING ADDRESS:				
Registration Section Registration Section				
Division of Corporations  Division of Corporations				
Clifton Building P. O. Box 6327				
2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301				

## CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

HFI. L+d.					
Insert name currentl	ly on file with Florida Depar	tment of State	<del></del>		
Pursuant to the provisions of section 620.1202, Florida Statutes, this Florida limited partnership or limited liability limited partnership, whose certificate was filed with the Florida Department of State on May 5, 2006, assigned Florida document number A0600000617, adopts the following certificate of amendment to its certificate of limited partnership.					
This amendment is submitted to amend the follo	wing:				
A. If amending name, <u>enter the new name onere:</u>	f the limited partnership	or limited liability limi	ted partnership		
New name must be dist	inguishable and contain an a	cceptable suffix.			
Acceptable Limited Partnership suffixes: Limited Pa Acceptable Limited Liability Limited Partnership su			r LLLP.		
B. If amending mailing address and/or p principal office address here:	orincipal office address	s, <u>enter new mailing a</u>	ddress and/or		
New Principal Office Address (Must be STREET address)	<u>s:</u>				
New Mailing Address: (May be post office box)			-		
C. If amending the registered agent and/or new registered agent and/or the new registere  Name of New Registered Agent:		on our records, <u>enter t</u>	the name of the		
New Registered Office Address:					
New Registered Office Address.	Enter Floi	rida street address	· -		
-	City	, Florida Zip Cod	TILE III APR 28 P		
	Page 1 of 3	, FLO			

## New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

If Changing Registered Agent, Signature of New Registered Agent

D.	If amending the general	partner(s),	enter the name	e and business	address of each	general partner	being
ado	led or removed from our	records:					

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
GP	Lawrence Hurwit	1112 Weston Rd */ Weston, FL 33326	/4 ☐ Add ☑ Remove
<u>GP</u>	Hurwit Management torp.	1112 Weston Road, #114 Weston, FL 3332	Add Remove
			Add Remove
	artnership or limited liability o" status, enter change here:	limited partnership is amend	ling its "limited liability
This Limited	Partnership hereby elects to be a	"Limited Liability Limited Pa	rtnership."
☐ This Limited	Partnership hereby removes its '	Limited Liability Limited Part	nership" status.

Page 2 of 3

(NOTE: If adding or removing" limited liability limited partnership" status, all general partners must sign this amendment.)

F. If amending any other info	rmation, enter	r change(s)	here: (Attach additional sheets, if necessary.)
			<del></del>
	· ·	· ,	<del></del>
Effective date, if other than the date	te of filing:	after the dat	te this document is filed by the Florida Department of
State.)	re man 90 aays	ajter the aut	ie this document is flied by the Florida Department of
Signature(s) of a general partner	r or all gener	ral partne	<u>rs*:</u>
(*NOTE: Only one current general partr removing a "limited liability limited parts when adding or removing a "limited liabi	nership" election	n statement.	ocument unless the limited partnership is adding or Chapter 620, F.S., requires all general partners to sign ction statement.)
Jones .			
	<del></del>		
	<del></del>		
Signature(s) of all new or dissoci	iating genera	l partner(	(s), if any:
+ sun	_		
	<del></del>		
Filing Fee:	\$52.50		
Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$8.75		