ADDOOOOS

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
0)119				

Office Use Only



500082241935

01/02/07-01009-019-

07 JAN 17 PM 4: 03

COVER LETTER

Division of	Corporations		
		FAMILY LIMITED	
The enclosed Certif	icate of Amendment a	nd fee(s) are submitted fo	or filing.
Please return all cor	respondence concerni	ng this matter to:	
SWOTE	(Contact Person)		
<u> </u>	(Contact Person) EEP S'NGH (Firm/Company)	, LLC	
3525	(Firm/Company) SIST AVE W (Address)	J	
	(City, State and Zip Code)		
For further informat	ion concerning this m	atter, please call:	
SWEEP (Name of Cont	SINGH tact Person)	at (941) 44 (Area Code and Day	17-0276 time Telephone Number)
Enclosed is a check	for the following amo	ount:	
\$52.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status		Certified Copy, and
STREET ADDRESS:		MAILING AI	DDRESS: I but still woll st
Registration Section		Certificate of Status (Altrady paid t cached) MAILING ADDRESS: Registration Section Division of Corporations	
Division of Corporations		21 island of Corporations .	
Clifton Building		P. O. Box 6327	
2661 Executive Center Circle		Tallahassee, Fl	L 32314
Tallahassee, FL 32301			

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

SUDEEP SINGH FAMILY	LIMITED PARTNERSHIP
(Insert name currently on file	e with Florida Department of State)
	nership, whose certificate was filed with the
FIRST: Amendment(s): (Indicate information)	ation being amended, added, or deleted)
(1) Change of Lin SUDEEP SINGH FA	MILY LIMITED PARTNERSHIP TO
LIMITED LIABILITY elects to be a LU SUDEEP SINGH FAM	LIMITED PARTNERSHIP Which LY LIMITED LIABILITY LIMITED PARTNERSHIP
(2) The general poly to SUDEEP Si	
SECOND: Effective date, if other than the	e date of filing: Date of filing.
(Effective date cannot be prior to nor more than 90 Department of State.)	days after the date this document is filed by the Florida
Signature(s) of a general partner(s)*: (*Note: If adding or deleting an election to be a linguistry partners must sign the amendment.)	mited liability limited partnership statement, all general
Signature(s) of <u>new</u> or <u>dissociating</u> general	al partner(s), if any:
Filing Fee: \$52.5 Certified Copy (optional): \$52.5 Certificate of Status (optional): \$2.7	50