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Certified Copies	_ Certificates	s of Status	
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Special Instructions to	Filing Officer:		

Office Use Only



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SECRETARY OF SIATION OF CORPORATION

G. MCLEOD

OCT 13 2008

EXAMINER

COVER LETTER

TO:

	Corporations		4
SUBJECT:	Horenci'a	D Suarez tar thership or Limited Liability	mily Limitod y Limitod Partnership)
The enclosed Certif	icate of Amendment ar	nd fee(s) are submitted	for filing.
	respondence concernir	-	
Magaly	Contact Person) Svarez (Firm/Company)	NODARSE Family Lim	irtel Ponta
13480	50 30 S (Address)	Treet	
	FL 33 (City, State and Zip Code)		
For further informa	tion concerning this ma	atter, please call:	
Haggly Su	arez-Nodarse	at (305)	aytime Telephone Number)
Name of Cor	tact Person)	(Area Code and D	aytime Telephone Number)
Enclosed is a check	for the following amo	unt:	
\$52.50 Filing Fee	☐\$61.25 Filing Fee and Certificate of Status	☐\$105.00 Filing Fee and Certified Copy	\$113.75 Filing Fee, Certified Copy, and Certificate of Status
STREET ADDRE Registration Sectio Division of Corpora Clifton Building 2661 Executive Ce Tallahassee, FL 32	n ations nter Circle	MAILING A Registration Division of O P: O. Box 63 Tallahassee,	Section Corporations 27

er ship

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP

(Insert name currently o	on file with Florida Department of State)	
limited liability limited partnership, whose cer	2, Florida Statutes, this Florida limited partnership or rtificate was filed with the Florida Department of Sta Florida document number A 7 000 000 15 to its certificate of limited partnership.	te on
This amendment is submitted to amend the following	· <u>-</u> C	SECRE
A. If amending name, <u>enter the new name of th</u>	he limited partnership or limited liability limited liability limited partnership or limited liability limited partnership or limited liability limited liability limited partnership or limited liability liabi	-
Acceptable Limited Partnership suffixes: Limited Partn	nership, Limited, L.P., LP, or Ltd. xes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.	STATE
B. If amending mailing address and/or principal office address here:	incipal office address, <u>enter new mailing address a</u>	nd/or
New Principal Office Address: (Must be STREET address)	13480 SW 30 Stre Mrami, FL 33175	eet
New Mailing Address: (May be post office hox)	13480 SW 30 Str Miami, FL 33175	eet
C. If amending the registered agent and/or registered agent and/or the new registered of	gistered office address on our records, <u>enter the name</u> office address here:	of the
Name of New Registered Agent:	Magaly Svarez Noda 13480 SW 30 St	rse
New Registered Office Address:	(Enter Florida street address) Wami, Florida (Zip Code)	5

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 and business address of each general partner being added or removed from our records:

<u>Title</u>	<u>Name</u>	Address	Type of Action
gp_	Florencio Suar	ez 2901 Sw 197en Mami, FL 331	Add Remove
gp.	Magaly Surrez No	• 21	
1P	Julian Nodarse	13480 SW 30 ST Mi'ami, FL 33/7	Add Remove
			_
·			_
			

- E. If the limited partnership or limited liability limited partnership is amending its "limited liability limited partnership" status, enter change here:
 - This Limited Partnership hereby elects to be a "Limited Liability Limited Partnership."
 - This Limited Partnership hereby removes its "Limited Liability Limited Partnership" status.

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

F. If amonding any other information	an ontor change(s	have (Attach ad	ditional abouts if was	ann ann l
F: If amending any other information	m, enter enange(s	з пеге: (Апасп аа	uttonat sneets, ij nec	essary.j
			1	
Effective date, if other than the dat	e of filing:			
(Effective date cannot be prior to nor mor State.)	e than 90-days after	r the date this docum	ent is filed by the Flori	da Department of
Signature(s) of a general partner	or all general p	partners*:		
(*NOTE: Only one current general partn removing a "limited liability limited partn when adding or removing a "limited liabil	nership" election stat	tement. Chapter 620	, F.S., requires all gene	
Magale Toda	لجا			
•			1	
Signature(s) of all new or dissoci	ating general pa	artner(s), if any:		
Marla Danse				
1 dia Made				"
Julian Gour			•	
				····
Filing Fee:	\$52.50			
Certified Copy (optional):	\$52.50			•
Certificate of Status (optional):	\$8.75			