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Office Use Only

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SECRETARY OF STATE
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SECRETARY OF STATE

M. Thomas APR 28 2008

COVER LETTER

TO: Registration Sect Division of Corpo				
SUBJECT:(Name o	Paritet 1 f Florida Limited Partne	Motors L. Sership or Limited Liability	Limited Partnership)	_
The enclosed Certificate	of Amendment and	fee(s) are submitted	for filing.	
Please return all correspo	ondence concerning	this matter to:	,	•
Son	Contact Person)			
·	Firm/Company) lova Dr. # (Address)	191		OB APR 2
	(Address) 333/7 State and Zip Code)			OB APR 25 PA 12: 45 SECRETAGE OF STATE SECRETAGE OF STATE
For further information of	concerning this matte	er, please call:		Bill or
Son Tri	nh	at (<u>954</u>) 9	10 - 9947 aytime Telephone Number)	_
(Name of Contact Po			aytime Telephone Number)	
an		\$105.00 Filing Fee and Certified Copy	S113.75 Filing Fee, Certified Copy, and Certificate of Status	
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center C		MAILING A Registration S Division of C P. O. Box 633 Tallahassee,	Section Corporations 27	

Tallahassee, FL 32301

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

OF
Paritet Motors, L.P. (Insert name currently on file with Florida Department of State)
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 November, 28, 2007, adopts the following certificate of amendment to its certificate of limited partnership.
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited partnership or limited liability limited partnership here:
(New name must be distinguishable and contain an acceptable suffix.) Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP. B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:
Name of New Registered Agent: New Registered Office Address: Son Trink
Holly wood, Florida 33317 (City) (Zip Code)

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)

C. 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>	Name	Address	Type of Action
	Son Trinh	116 N. 13th Ave #107, Hollywood, 174 3301	
	Jaguaris Brown	6511 Nova Dr. #19 Davie FL 33317	Add Remove
			Add Remove
			Add Remove Add Remove Add Remove Remove
			_ Add FF OF S
			_ Add _ Remove
imited partners This Limited This Limited This Limited	d partnership or limited liability thip" status, enter change here: I Partnership hereby elects to be a I Partnership hereby removes its " or removing" limited liability limited pony	"Limited Liability Limited Part Limited Liability Limited Partn artnership" status, all general partn	tnership." nership" status. ers must sign this amendment.)

Effective date, if other than the date of filing: (Effective date cannot be prior to nor more than 90 days after the date State.)	te this document is filed by the Florida Department of
Signature(s) of a general partner or all general partne	<u>rs*:</u>
(*NOTE: Only one current general partner is required to sign this de removing a "limited liability limited partnership" election statement. when adding or removing a "limited liability limited partnership" ele	Chapter 620, F.S., requires all general partners to sign
	<u> </u>
	RECEIPT OF PHILED
	25
	FOR ALICE
Signature(s) of all new or dissociating general partner	(s), if any:
2	
Jan	

Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75