# A0800000 959

(Requestor's Name	)			
(Address)				
(Address)	<u> </u>			
(City/State/Zip/Phor	ne#			
PICK-UP WAIT	MAIL			
(Business Entity				
(Document Number	r)			
Certified Copies Certificate	es of Status			
Special Instructions to Filing Officer:				

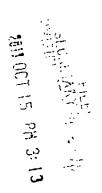
Office Use Only



800318222428



09/17/18--01010--008 \*\*52.50



& CAUSSEAUX 96T 1 7 2018

į

### **COVER LETTER**

	CO: Registration Section Division of Corporations					
SUBJE	CT: North Ri	ver Investment Group L	LLP			
SOBOL		me of Florida Limited Par	tnership or Limit	ed Liabilit	y Limited Partnership	
The end	closed Certifi	cate of Amendment a	nd fee(s) are su	bmitted	for filing.	
Please i	eturn all cori	espondence concernir	ng this matter t	0:		
Matthey	v Kezar					
		Contact Person				
		Firm/Company	_			
3325 10	th Ln W.		<del></del>			
		Address				
Palmett	o, FL 34221					
	(	City, State and Zip Code				
15-r	nail address: (to	be used for future annual	report notificatio	<u>n)</u>		
For furt	ther informat	ion concerning this ma	atter, please ca	11:		
Matthey	v Kezar		941 at (	720-	1973	
	Name of Contact Person		Area Code and Daytime Telephone Number			
Enclose	ed is a check	for the following amo	unt:			
<b>S</b> \$52.5	0 Filing Fee	□\$61.25 Filing Fee and Certificate of Status	☐\$105.00 Filing F and Certified Copy		☐\$113.75 Filing Fee. Certified Copy, and Certificate of Status	
STREET ADDRESS:		MAILING ADDRESS:				
Registration Section				Registration Section		
Division of Corporations				Division of Corporations		
Clifton Building			P. O. Box 6327			
	xecutive Cen		Tall	ahassee.	FL 32314	
Tallaha	issee, FL 32.	301				



September 20, 2018

MATTHEW KEZAR 3325 10TH LANE WEST PALMETTO, FL 34221

SUBJECT: NORTH RIVER INVESTMENT GROUP LLLP

Ref. Number: A08000000959

We have received your document for NORTH RIVER INVESTMENT GROUP LLLP and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by all of the general partners.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Nanette Causseaux
Regulatory Specialist II Supervisor
Letter Number: 718A00019649

www.sunbiz.org

#### CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

North River Investment Group LLLP			
Insert name currently on	file with Florida Depa	rtment of State	PH 3: 14
Pursuant to the provisions of section 620.1202, limited liability limited partnership, whose certi 11/17/2008 , assigned F	ficate was filed wi lorida document ni	th the Florida Department of Sta imber A08000000959	
adopts the following certificate of amendment to	o its certificate of I	imited partnership.	
This amendment is submitted to amend the following	<del>.</del>		
A. If amending name, enter the new name of the here:	limited partnershi	p or limited liability limited parts	<u>iership</u>
New name must be distingui	shable and contain an	acceptable suffix.	
Acceptable Limited Partnership suffixes Limited Partner Acceptable Limited Liability Limited Partnership suffixes			
B. If amending mailing address and/or princ principal office address here:	cipal office addres	s, enter new mailing address a	nd/or
New Principal Office Address: (Must be STREET address)			
New Mailing Address: (May be post office box)			
C. If amending the registered agent and/or regis new registered agent and/or the new registered off	stered office addres ice address here:	s on our records, enter the name	of the
Name of New Registered Agent:		h-1	
New Registered Office Address:	Enter Flo	orida street address	
		, Florida	
	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

## 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
Gen Parlni	Matthew B Kezar	5230 SR 64 E Bradenton, FL 34208	Add Remove
<del> </del>			☐ Add
<del></del>			☐ Add ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
			☐ Add (3.) ☐ Remove ☐
<del></del>			☐ Add ☐ Remove
			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 bereby	clects to be a '	"Limited I	Liability l	Limited P	'artnership."
--	----------------	--------------------	------------------	------------	-------------	-----------	---------------

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

<sup>☐</sup> This Limited Partnership hereby removes its "Limited Liability Limited Partnership" status.

r. It amending any other infor	mation, enter change(s) here: (Attach additi	ional sheets, if necessary.)
-		-
··		
Effective data if other than the data	- F.C.	
Effective date, if other than the date (Effective date cannot be prior to nor more	e than 90 days after the date this document is filed	d by the Florida Department of
State )	s not meet the applicable statutory filing requiren	•
be listed as the document's effective date of	on the Department of State's records.	ienes, this date will hot
Signature(s) of a general partner	or all general partners*	
removing a "limited liability limited partne	er is required to sign this document unless the limership" election statement. Chapter 620, F.S., req	ited partnership is adding or uires all general partners to sign
when adding or removing a "limited liabili	ity limited partnership" election statement.)	record to bright
Mark.		
	<del></del>	-,_
1 Benun	<del>)</del>	:
		## 17 CT
		<u></u>
Signature (a) - f = 11 di i		л: :
Signature(s) of all new or dissocia	inng general partner(s), if any:	P
Mentil		<u> </u>
-		<del></del>
	\$52.50	
	\$52.50	
Certificate of Status (optional):	\$8.75	