

AO 9000000045

(Requestor's Name)

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(Address)

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(Business Entity Name)

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**REDGRAVE & ROSENTHAL<sup>LLP</sup>**  
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*Jennifer E. Zakin*  
*jzakin@redgraveandrosenthal.com*  
*Direct Dial 561.226.7819*

August 5, 2014

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Re: Baiju, LLLP  
BaijuMD, LLC  
GBV, LLLP

Dear Sir or Madam:

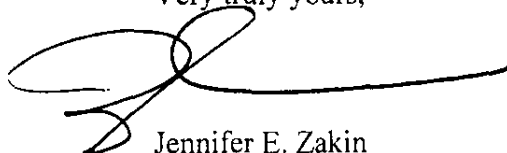
Enclosed please find a check payable to the "Florida Department of State" in the amount of \$1,202.50 for the filing fees in connection with the following documents:

1. Baiju, LLLP - Certificate of Limited Partnership (\$1,000);
2. BaijuMD, LLC - Articles of Conversion, Plan of Conversion, and Articles of Organization; and (\$150); and
3. GBV, LLLP - Certificate of Amendment to Certificate of Limited Partnership (\$52.50).

Please file the enclosed documents with the Florida Department of State and return confirmation of filing to our office at the address indicated on the attached cover letters.

If you have any questions, please do not hesitate to contact me.

Very truly yours,



Jennifer E. Zakin

JEZ/ib  
Enclosures

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** GBV, LLLP  
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:

Ilana Brunelle, Paralegal  
Contact Person

Redgrave & Rosenthal LLP  
Firm/Company

120 East Palmetto Park Road, Suite 400  
Address

Boca Raton, Florida 33432  
City, State and Zip Code

gbvltd@yahoo.com  
E-mail address: (to be used for future annual report notification)

2014 MAR 11 AM 4: 17  
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 TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Jennifer E. Zakin, Esq. at ( 561 ) 347-1700  
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- \$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 ADDRESS:**  
 Registration Section  
 Division of Corporations  
 Clifton Building  
 2661 Executive Center Circle  
 Tallahassee, FL 32301

**MAILING ADDRESS:**  
 Registration Section  
 Division of Corporations  
 P. O. Box 6327  
 Tallahassee, FL 32314

**CERTIFICATE OF AMENDMENT  
TO  
CERTIFICATE OF LIMITED PARTNERSHIP  
OF**

**GBV, LLLP**

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 January 20, 2009, assigned Florida document number A09000000045, adopts the following certificate of amendment to its certificate of limited partnership.

2014 JUL 11 AM 11:17  
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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 mailing address and/or principal office address, enter new mailing address and/or principal office address here:**

New Principal Office Address:

*(Must be STREET address)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

New Mailing Address:

*(May be post office box)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**C. 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:

*Enter Florida 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.*

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 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>	<u>Address</u>	<u>Type of Action</u>
<u>GP</u>	<u>Ashok Patel</u>	<u>11508 NW 73rd Manor Parkland, Florida 33076</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
<u>GP</u>	<u>Ashok Patel, as Trustee of the Ashok Patel Revocable Trust dated July 1, 1992, as amended</u>	<u>11508 NW 73rd Manor Parkland, Florida 33076</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> 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 amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Effective date, if other than the date of filing: \_\_\_\_\_  
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

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2011 SEP 11 AM 11:42  
TALLAHASSEE, FLORIDA

**Signature(s) of a general partner or all general partners\*:**

(\*NOTE: Only one current general partner is required to sign this document unless the limited partnership is adding or removing a "limited liability limited partnership" election statement. Chapter 620, F.S., requires all general partners to sign when adding or removing a "limited liability limited partnership" election statement.)

Ashok Patel MD  
Ashok Patel

\_\_\_\_\_  
\_\_\_\_\_

**Signature(s) of all new or dissociating general partner(s), if any:**

Ashok Patel MD  
Ashok Patel

Ashok Patel MD  
Ashok Patel, as Trustee of the Ashok Patel Revocable Trust dated July 1, 1992, as amended

\_\_\_\_\_  
\_\_\_\_\_

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