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R. WHITE.
MAY 13 2021

	COM	TD Y radioners			
	COVI	ER LETTER			
	TO: Registration Section Division of Corporations				
SUBJECT: The Aqu	adro Family Limited Liab	ility Limited Partnersl	hip		
N	ame of Florida Limited Pa	rtnership or Limited L	iability Limited Partnership		
	icate of Amendment a				
Please return all cor	respondence concerni	ng this matter to:			
Mary Downey Costello					
	Contact Person				
Costello & Leiter, P.C.					
	Firm/Company				
1500 Main Street, Suite	2000, PO Box 15629				
	Address				
Springfield, MA 01115-	5629				
(City, State and Zip Code				
lauriemcmahon@costel	lo-leiter.com				
E-mail address: (to	be used for future annual	report notification)			
For further informati	on concerning this ma	atter, please call:			
Mary Costello or Laurie	McMahon	at ()	214-6100		
Name of Conta	ct Person	at () Area Code and	Daytime Telephone Number		
Enclosed is a check t	for the following amo				
\$52.50 Filing Fee	☐\$61.25 Filing Fee and Certificate of Status	□\$105.00 Filing F and Certified Copy			
Mailing Address:		Street A	ddress:		

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

Registration Section
Division of Corporations
The Centre of Tallahassee

CERTIFICATE OF AMENDMENT [. - 1 12:11] TO CERTIFICATE OF LIMITED PARTNERSHIP OF

The Aquadro Family Limited Liability		
Insert name curr	ently on t	file with Florida Department of State
limited liability limited partnership, who	se certif gned Fl	Florida Statutes, this Florida limited partnership or ficate was filed with the Florida Department of State on orida document number A09000000083, o its certificate of limited partnership.
This amendment is submitted to amend the fo	llowing:	:
A. If amending name, enter the new namhere:	e of the	limited partnership or limited liability limited partnership
New name must be	distinguis	shable and contain an acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Acceptable Limited Liability Limited Partnership	Partners suffixes:	
principal office address nere:		(***)
New Principal Office Addr	ess:	3240 Hamlet Dr (XAL)
(Must be STREET address)		#2 Naples, FL 34105
New Mailing Address: (May be post office box)		3240 Hamlet St. (341 05) #2 Naples, FL 34105
C. If amending the registered agent and/or registered agent and/or the new registered	register office ad	red office address on our records, <u>enter the name of the new</u>
Name of New Registered Agent:	Elizabi	th A. Kouri
New Registered Office Address:	3240 I	famlet, #2
		Enter Florida street address
	Naples	City Florida Street dadress Florida 91405 34/05 Zio Code
		City Zin 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
Elizabeth A. Kouri

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. Prtn	Richard C. Aquadro	4216 Gull Cove Road New Smyrna Beach, FL 32169	_ □ Add □ Remove
Gen. Prtn	Marie E. Aquadro	4216 Gull Cove Road New Smyrna Beach, FL 32169	_ □ Add _ 53 Remove
Gen. Prtn	Daniel J. Gleason	Co-Trustee of the Richard C. Aquadro Revocable Trust, 600 Kennedy Rd., Leeds, MA 01053	_ ■ Add _ □ Remove
Gen. Prin	Daniel J. Gleason	Personal Rep. of Estate of Marie E Aquadro, 600 Kennedy Rd, Leeds, MA 01053	_ ■ Add □ Remove
			_ □ 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:

0	This Limited Partner	ship hereby elects to be a	"Limited Liability	Limited Partnership."
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☐ This Limited Partnership hereby removes its "Limited Liability Limited Partnership" status.

F. If amending any other information, enter ch	ange(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 State.) Note: If the date inserted in this block does not meet the appliable listed as the document's effective date on the Department of the date of the d	icable statutory filing requirements, this data will are
Signature(s) of a general partner or all gene	
(*NOTE: Only one current general partner is required to sign removing a "limited liability limited partnership" election stat when adding or removing a "limited liability limited partnership"	tement Chapter 620 E.S. requires all conservations and
Signature(s) of all new or dissociating general pa	rtner(s), if any:
Daniel J. Gleason, Co-Trustee of the	
Richard C. Aquadro Revocable Trust	Daniel J. Gleason, Personal Rep. of the Estate of Marie E. Aquadro
General Partner	General Partner
Daniely Glason	Canily Gleason
•	<i>V</i>
Filing Fee: \$52.50	
Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	