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(((H25000124844 3)))



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To:

Division of Corporations Fax Number : (850)617-6383

From:

Account Name : GASSMAN, CROTTY & DENICOLO, P.A.

Account Number : 075350000514 Phone : (727)442-1200 Fax Number : (727)443-5829

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:\_\_\_

## LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION GRANT ALLIANCE, L.L.L.P.

Certificate of Status	0
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Help

1/1

FAX AUDIT # H25000124844 3

## CERTIFICATE OF AMENDMENT

TO CERTIFICATE OF LIMITED PARTNERSHIP OF				
GRANT ALLIANCE, L.IP.			<u> </u>	
Insert name currently on fil	le with Florida I	Department of State		
Pursuant to the provisions of section 620.1202, Fl limited liability limited partnership, whose certification of the following certificate of amendment to	cate was filed rida documen	with the Florida I nt number A090000	Department of State on 00495	
This amendment is submitted to amend the following:		•		
A. If amending name, enter the new name of the l	imited partne	rship or limited lia	bility limited partnership	
New name must be distinguish	nable and contain	n an acceptable suffix.		
Acceptable Limited Partnership suffixes: Limited Partnersh Acceptable Limited Liability Limited Partnership suffixes: I	hip, Limited, L.P Limited Liability	., l.P., or Ltd. Limited Partnership,	E.L.L.P. or LLLP.	
B. If amending mailing address and/or principal office address here:	pal office add	lress, <u>enter new r</u>	nailing address and/or	
New Principal Office Address: (Must be STREET address)			PR - 7	
New Mailing Address: (May be post office box)			D 9 27	
C. If amending the registered agent and/or registered registered agent and/or the new registered office ad-		ess on our records,	enter the name of the new	
Name of New Registered Agent:				
New Registered Office Address:		F1 - 11		
	Ente	r Florida street addr	,	
	City	Florida, Florida	Zip Code	
AUDIT # H25000124844 3				

FAX A

Page 1 of 3

FAX AUDIT # H25000124844 3

## 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 perform	ance 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:

Title	Name	<u>Address</u>	Type of Action
GP	TONY CACCIOTTI	975 BROADWAY DUNEDIN, FL 34698	☐ Add
GP	THE ESTATE OF TONY CACCIOTTI	1245 COURT STREET CLEARWATER, FL 33756	Add :
			Add Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
<del></del>		:	Add :

- 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.)

	FAX AUDIT #H2500012484
F. If amonding any other information, enter chan	ige(s) here: (Attach additional sheets, if necessary.)
21	
ective date, if other than the date of filing:	
ective date cannot be prior to nor more than 90 days after to e.) e: If the date inserted in this block does not meet the applica- isted as the document's effective date on the Department of	the date this document is filed by the Florida Department of able statutory filing requirements, this date will not State's records.
quature(s) of a general partner or all general pa	ortners*:
IOTE: Only one current general partner is required to sign- noving a "limited liability limited partnership" election states an adding or Emoving a "limited liability limited partnership	ment. Chapter 620, F.S., requires all general partners to sign
ENNETH J. CICUITY, as Personal Representative for DNY CACCIOTS	
gunture(x) of all new or dissociating general par	tner(s), if any:
there \	× han
CENNETIA), CROTTY, as Personal Representative for ONY CACCIONY	KENNETTI J. CROTTY, as Personal Representative of the ESTATE OF TONY CACCIOTTI
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ertified Copy (optional): \$52.50	•

Page 3 of 3