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(Re	equestor's Name)	
(Ac	ldress)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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B. BOSTICK
MAR 29 2011
EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: TERV ENTERPRISES, LP	
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:	
THERESA CARMENATTI Contact Person	
TERY ENTERPRISES, LP Firm/Company	
11750 NE 16 AVE # 111  Address	
NORTH MIAMI FL 33/6/ City, State and Zip Code	
Theresabig 1015@ Yahvo. Com  E-mail address: (to be dised for future annual report notification)  HE	To a
For further information concerning this matter, please call:	14 144 11 344
THERESA CARMENATTI at (786) 586.3828 = [	
Name of Contact Person Area Code and Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$52.50 Filing Fee and Certificate of and Certified Copy Status  \$105.00 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	
2661 Executive Center Circle Tallahassee, FL 32314	
Tallahassee, FL 32301	

## CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

TERY ENTERPRISES  Insert name currently on file wi	th Florida Department of State
	•
Pursuant to the provisions of section 620.1202, Floridalimited liability limited partnership, whose certificate \( \frac{\frac{1}{24-1}}{24-1} \), assigned Floridalimited section 620.1202, Floridalimited liability limited partnership, whose certificates	was filed with the Florida Department of State on document number $A 1/00000/62$ ,
adopts the following certificate of amendment to its of	ertificate of limited partnership.
This amendment is submitted to amend the following:	
(A.) If amending name, enter the new name of the limit	ed partnership or limited liability limited partnership
here:	4
New name must be distinguishable	S.LP.
Acceptable Limited Hartnership suffixes: Limited Partnership, I Acceptable Limited Liability Limited Partnership suffixes: Limit	
B. If amending mailing address and/or principal	office address, enter new mailing address and/or
principal office address here:	LLA M
New Principal Office Address:	Tir A
(Must be STREET address)	<u> </u>
	1
New Mailing Address: (May be post office box)	
(May be post diffee bus)	DH 2
C. If amending the registered agent and/or registered new registered agent and/or the new registered office ad	
new registered agent and/or the new registered office ad	uress here.
Name of New Registered Agent:	
•	
New Registered Office Address:	Enter Florida street address

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
			Add Remove
			Add Remove
			Add Remove Add Remove 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:

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.)
NEW MAILING ADDRESS
11750 NE 16AVE #111-N.MIAMI, FL. 33/61
PALLA I BALL AND TO
11750 NE. 16 AVE \$111-North MIAMI, FL. 33161
Effective date, if other than the date of filing:
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 si when adding or removing a "limited liability limited partnership" election statement.)
the annenation
TALLAR H
Signature(s) of all new or dissociating general partner(s), if any:
PITE A
Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75