# A11000000359

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SECRETARY OF STATE

J. BRYAN

DEC 1 1 2012

**EXAMINER** 

# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: ASKARBEN LIMITED PARTNERSHIP  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:
JENNIFER LEVIN, ESQ.
FROMBERG, PERLOW & KORNIK, P.A.  Firm/Company
18901 NE 29 AVE, SUITE 100
Address F. 22100
AVENTURA FL 33180  City, State and Zip Code
IL EVINOEDIC LAW COM
JLEVIN@FPK-LAW.COM  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jennifer Levin, Esq. at ( 305 ) 933-2000
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 Status  \$105.00 Filing Fee S113.75 Filing Fee, Certified Copy, and Certificate of Status
STREET ADDRESS: MAILING ADDRESS:
Registration Section Registration Section
Division of Corporations  Clifton Building  Division of Corporations  P. O. Box 6327
2661 Executive Center Circle Tallahassee, FI 32314

Tallahassee, FL 32301

## CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

Winds to Mr. 13

# ASKARBEN LIMITED PARTNERSHIP

Insert name currently on file with Florida Department of State

Pursuant to the provisions of section 620.1202, Flo limited liability limited partnership, whose certifice May 11, 2011, assigned Flori	ate was filed wi da document nu	th the Florida Department of State on imber A1100000359
adopts the following certificate of amendment to it	s certificate of I	imited partnership.
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited partnershi	or limited liability limited partnership
AKSARBEN LIMIT	ED PARTN	ERSHIP
New name must be distinguisha		
Acceptable Limited Partnership suffixes: Limited Partnership Acceptable Limited Liability Limited Partnership suffixes: Li		
B. If amending mailing address and/or principal principal office address here:	al office addres	s, enter new mailing address and/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 registernew registered agent and/or the new registered office		s on our records, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	Enter Flo	orida street address
	City	, Florida 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	
GP	JOSEPH POLONSKI		Add Remote	
GP	BLUMA POLONSKI		Add SAA	
<u>GP</u>	JABPO, INC.	18901 NE 29 Avenue Suite 100 Aventura FL 33180	— ✓ 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.)

	Pro R.
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Effective date, if other than the date of filing:	
(Effective date cannot be prior to nor more than 90 days after State.)	the date this document is filed by the Florida Department of
Signature(s) of a general partner or all general p	artners*:
(*NOTE: Only one current general partner is required to sign removing a "limited liability limited partnership" election state when adding or removing a "limited liability limited partnersh DLD GENERAL PARTNERS:  JOSCIAN TO LOVINE "  JOSCIAN TO LOVINE"  BLUMA POLONSICI  Signature(s) of all new or dissociating general pa	ement. Chapter 620, F.S., requires all general partners to sign in election statement.)  NEW GENERAL PARTNER  JABPO, INC.  By: Joseph Tolonski, Preside
Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	