A1300000100				
(Requestor's Name) (Address) (Address)	500296403365			
(City/State/Zip/Phone #)				
(Document Number) Certified Copies Certificates of Status	03/18/1701008012 **52.50			
Office Use Only	BRUCE			

L.

L

- - -

MAR 16 20



March 6, 2017

JULIO C ARRIAGA 3487 DERBY LANE WESTON, FL 33331

SUBJECT: A. F. ENTERPRISES OF FLORIDA, LLLP Ref. Number: A13000000160

We have received your document for A. F. ENTERPRISES OF FLORIDA, LLLP, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$52.50.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 917A00004261

H H 15 A II:  $\sim$ 

#### **COVER LETTER**

#### **Registration Section** TO: **Division of Corporations**

## A. F. ENTERPRISES OF FLORIDA, LLLP Name of Florida Limited Partnership or Limited Liability Limited Partnership SUBJECT:

The enclosed Certificate of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Julio C. Arriaga Contact Person A. F. Enterprises of Florida, LLLP Firm/Company	
3487 Derby Lane Address	2017 HAR SECRET
Weston, FL 33331 City, State and Zip Code julio@warehouserenting.com	
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:	
Julio C. Arriagaat (305Name of Contact PersonArea Code an	) 798-3966 d Daytime Telephone Number
Enclosed is a check for the following amount:	
✓\$52.50 Filing Fee S61.25 Filing Fee and Certificate of and Certified Cop 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

## A. F. ENTERPRISES OF FLORIDA, 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 03/27/2013 \_\_\_\_\_, assigned Florida document number \_\_\_\_\_ A13000000160 adopts the following certificate of amendment to its certificate of limited partnership.

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. principal office address here:

New Principal Office Address:	HAR	1
(Must be STREET address)	Shi -	7
· · · · · · · · · · · · · · · · · · ·		لمخدة
New Mailing Address:		
(May be post office box)		
	ل ما	

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

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>	Name	Address	Type of Action
<u>GP</u>	<u>Arriaga Management LL(</u>	<u>9550 NW 79th Ave. Suite 10-11 Hialeah Gardens, FL 3301</u>	Add Remove
<u>GP</u>	Julio C. Arriaga	3487 Derby Lane Weston, FL 33331	Add Remove
			Add Remove
	<u> </u>		dd Remove
		ے۔ بلا س	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.)

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.)

#### 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.)

Julio

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

anagement, LLC

сh

Π

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