A13000000319

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	9 #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		,
····		





000271962600

04/28/15--01003--007 **52.50

J. HARRIS

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: HB INCOME PROPERTIES LLLP
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:
Charles Z. Kalchman Contact Person
Charles Z. Kalchman, Esq. Firm/Company
• •
17071 W. Dixie Highway Address
Address
N. Miami Beach, FL 33160
City, State and Zip Code
jmnahon@gmail.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Charles Z. Kalchman at (305) 937-5134
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 Certified Copy 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, FL 32314
Tallahassee FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 6, 2015

CHARLES Z KALCHMAN 17071 W DIXIE HIGHWAY N MIAMI BEACH, FL 33160

SUBJECT: HB INCOME PROPERTIES LLLP

Ref. Number: A13000000319

We have received your document for HB INCOME PROPERTIES LLLP and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the dissociating general partner unless the document states the general partner is deceased or a guardian or general conservator has been appointed or the general partner previously filed a Statement of Dissociation with the Florida Department of State.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Jenna D Harris Regulatory Specialist II

Letter Number: 815A00009340

2015 MAY 21 AM 4:32

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

HB INCOME PROPERTIES LLLP

Insert name currently on file with Florida Department of State

limited liability limited partnership, whose certi	ificate was filed with the Florida Dep	artment o	of State	e on
limited liability limited partnership, whose certificate was filed with the Florida Department of State on 06/17/2013				
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., L.P. 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: New Principal Office Address: (Must be STREET address) New Mailing Address: (May be post office box) 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 name must be distingui	ishable and contain an acceptable suffix.	<u> </u>	
Acceptable Limited Partnership suffixes: Limited Partner Acceptable Limited Liability Limited Partnership suffixes	rship, Limited, L.P., LP, or Ltd. s: Limited Liability Limited Partnership, L.L	.L.P. or LL	LP.	
	cipal office address, <u>enter new mai</u>	ling addı	ress an	<u>ıd/or</u>
				
			<u> </u>	
		enter the	name (of the
Name of New Registered Agent:				
New Registered Office Address:		ALII.	- - -	
	Enler Florida street address	AHA:	\prec	17
·	, Florida	p Code	2	anyone,
	- · · · · · · · · · · · · · · · · · · ·	07 37 17 37	AN L	# 1 j

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	l Agent, Signature	e of New Registered Agent

D,	If amendir	ng the go	eneral	partner(s),	enter 1	he name	and	business	address	of	<u>each</u>	general	partner	being
<u>ado</u>	<mark>led or remo</mark>	ved fror	n our i	records:										

the state of the s
10 10

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.)

	mation, enter change(s		
			·
			
ffective date, if other than the date	e of filing:		 .
		date this document is filed by the Florida Departmen	t of
,			
ignature(s) of a general partner	ar all general nartn	nere*•	
-			-
moving a "limited liability limited partne	ership" election statement	s document unless the limited partnership is adding or ont. Chapter 620, F.S., requires all general partners to	
hen adding or removing a "limited liabili Eagle RHGP, Inc.	ty limited partnership" el	election statement.)	
(Y \ _	•		
By:			
James Nahon, President	-		
<u> </u>			
ignature(s) of all new or dissocia	ting general partne	er(s), if any	
HPIGP LP			
By: Eagle RHGP, Inc., (General Partno	ier V	
// /		James Nahon	
1/			
By: James Nahon, Presid	dent	Laufman Ex	
By: James Nahon, Presidential	dent 	Yosef Manela P	ر
Martolf	dent ———	Yosef Manela A	
Bartosz Uzarowski	### dent #### ### ### #### #### #### #### #### #### #### ######	Yosef Manela N	Service Servic