A14 000000 726

(Requestor's Name)				
(Ad	ldress)			
(Ad	ldress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	MAIT WAIT	MAIL		
(Bu	siness Entity Nar	me)		
•	•	,		
(Dr	ocument Number)			
(50	, oarnoni riambor,			
Cartified Carine	Contificator	n of Chahun		
Certified Copies	_ Certificates	s or Status		
,				
Special Instructions to	Filing Officer:			

Office Use Only



000265207340

10/10/14--01026--008 **52.50

14 OCT 10 AM II: 25
SECREMAY OF SIAGE

... Shavers OCT 1 5 2014

COVER LETTER
TO: Registration Section Division of Corporations
SUBJECT: Weston Family Ventures, LLLP Name of Florida Limited Partnership or Limited Liability 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:
Steve Weston
Contact Person
Weston Family Ventures, LLLP
Firm/Company
102 NE 2nd Street, Suite 400
Address
Boca Raton, FL 33432
City, State and Zip Code
1@sjw1.com
E-mail address: (to be used for future annual report notification)
•
For further information concerning this matter, please call:
Steve Weston at (561) 400-8470
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 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

	Weston Family Ventures, LLLP				
Insert name current	ly on file with Florida Departmer	it of State			
Pursuant to the provisions of section 620.13 limited liability limited partnership, whose April 29, 2014, assign	certificate was filed with the ed Florida document number	e Florida De er <u>A1</u>	epartment (40000002	of Sta	
adopts the following certificate of amendm	ent to its certificate of limit	ed partnersh	ip.		
This amendment is submitted to amend the follo	owing:				
A. If amending name, <u>enter the new name o</u> here:	of the limited partnership or	limited liabi	lity limited	part	<u>nership</u>
New name must be dis	tinguishable and contain an accep	table suffix.			
Acceptable Limited Partnership suffixes: Limited Pa Acceptable Limited Liability Limited Partnership su			.L.L.P. or LL	LP.	
B. If amending mailing address and/or principal office address here:	principal office address, <u>er</u>	nter new ma	ailing addı	ress	and/or
New Principal Office Addres		<u>t</u>	<u></u>		
(Must be STREET address)	Suite 400 Boca Raton, FL 33	3432	Fice.		
New Mailing Address:	102 NE 2nd Stree			14 oc1	1.71
(May be post office box)	Suite 400 Boca Raton, FL 3	3432	- 200		रामका के दूरामका क
	-			F	
C. If amending the registered agent and/or new registered agent and/or the new registered		our records	, enter the	nam 25	e of the
Name of New Registered Agent:					
New Registered Office Address:	102 NE 2nd Street, Suite	400			
· · · · · · · · · · · · · · · · · · ·	Enter Florida	street addres	'S		
	Boca Raton	, Florida _	33432		
	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			Regist	ered Agent

D.	If amending th	ie general	partner(s),	enter th	ie name	and	business	address	of each	general	partner	being
ado	<u>ded or removed</u>	from our	records:								-	

<u>Title</u>	Name	Address	Type of Action
<u>GP</u>	Steve Weston	7491 N Federal Hwy, C5-32 Boca Raton, FL 33487	22 ☐ Add Remove
<u>GP</u>	Steve Weston	102 NE 2nd Street Suite 400 Boca Raton, FL 33432	Add Remove
			Add Remove
	-		Add 7
			Add Remove
			Add S Remove

E. If the limited partnership or limited liability limited partnership is amending its "limited liability limited partnership" status, enter change here:

Į		This Limited Partnership hereby elects to be a "Limited Liability Limited Partnership."
r	_	

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.)			
This Limited Partnership continues its original e	election		
to be a Limited Liability Limited Partnership.			
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	ement. Chapter 620, F.S., requires all general partners to sig		
Steve Waston			
	No. of the Control of		
Signature(s) of all new or dissociating general pa	rtner(s), if any:		
el ist	# OC		
Steve Western	SS D FE		
			
	C C C		
	25 ND		
	-		
Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75			