

A14 00000073L

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

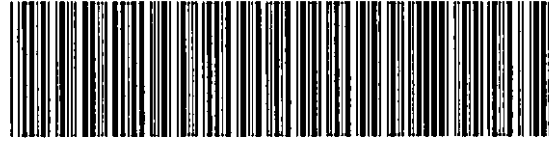
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

9-4

Office Use Only



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09/25/22--01010--013 \$105.00

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2022 SEP -6 AM 11:30

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 1, 2022

STEVEN E. FULLER  
2953 W. CYPRESS CREEK RD, STE 200  
FORT LAUDERDALE, FL 33309

SUBJECT: KOURI GROUP, LP  
Ref. Number: A14000000736

We have received your document and check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must be signed by a current general partner, if any, and by each newly designated general partner(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) 245-6050.

Querida R Silas  
Regulatory Specialist II

Letter Number: 822A00017167

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TALLAHASSEE, FL

**FULLER, WITCHER  
& COMPANY, P.A.**  
CERTIFIED PUBLIC ACCOUNTANTS

STEVEN E. FULLER, CPA  
TERRELL W. WITCHER, CPA

CYPRESS CREEK PROFESSIONAL PARK  
2953 WEST CYPRESS CREEK ROAD, SUITE 200  
FORT LAUDERDALE, FLORIDA 33309-1705

954-969-2092  
(FAX) 954-969-2098

August 31, 2022

Attention: Ms. Querida R. Silas  
Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Dear: Ms. Silas

We received your Letter Number: 822A00017167 dated August 1, 2022 (copy attached) regarding Kouri Group, LP's (EIN: 32-0457931) request to update the information provided to the State.

The Partnership originally filed a Certificate of Amendment to Certificate of Limited Partnership to update the General Partner(s) however there was missing information and signatures regarding the dissociating General Partners. The attached form includes all required information and signatures regarding the new General Partner and the dissociating General Partners.

Please note that there was a payment submitted with the original filing in the amount of \$105.00 for the filing fee of \$52.50 and a certified copy fee of \$52.50.

Thank you.

Sincerely,

FULLER, WITCHER & COMPANY, PA  
Certified Public Accountants

  
Steven E. Fuller

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FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FL

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** KOURI GROUP, 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:

STEVEN E. FULLER

Contact Person

FULLER, WITCHER & CO, P.A.

Firm/Company

2953 W. CYPRESS CREEK RD., STE 200

Address

FORT LAUDERDALE, FL 33309

City, State and Zip Code

STEVE@FULLERWITCHER.COM

E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

STEVEN E. FULLER

at ( 954 ) 969-2992

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$52.50 Filing Fee

☐ \$61.25 Filing Fee  
and Certificate of  
Status

☒ \$105.00 Filing Fee  
and Certified Copy

☐ \$113.75 Filing Fee,  
Certified Copy, and  
Certificate of Status

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**CERTIFICATE OF AMENDMENT  
TO  
CERTIFICATE OF LIMITED PARTNERSHIP  
OF**

KOURI GROUP, LP

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 12/19/2014, assigned Florida document number A14000000736, 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:**

New Principal Office Address:  
(Must be *STREET* address)

2953 W. CYPRESS CREEK ROAD  
SUITE 200  
FORT LAUDERDALE, FL 33309

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 Registered Office Address:

\_\_\_\_\_

*Enter Florida street address*

\_\_\_\_\_, Florida \_\_\_\_\_  
City Zip Code

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CLERK OF COURT  
CLERK OF COURT

**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>	<u>Address</u>	<u>Type of Action</u>
<u>GP</u>	<u>KOURI INVESTMENTS LP</u>	<u>4700 DE LA SAVANE</u> <u>212</u> <u>MONTREAL, QC, H4P 1T7, CA</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>GP</u>	<u>JM ECEMENDIA CO TRUST</u>	<u>4045 SHERIDAN AVE</u> <u>#240</u> <u>MIAMI BEACH, FL 33140</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>GP</u>	<u>A KORI CO TRUSTEE</u>	<u>4045 SHERIDAN AVE</u> <u>#240</u> <u>MIAMI BEACH, FL 33140</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>GP</u>	<u>8995443 CANADA, INC.</u>	<u>4700 DE LA SAVANE</u> <u>212</u> <u>MONTREAL, QC, H4P 1T7, CA</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> 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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**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.)

ANDREW KOURI, PRESIDENT OF GP



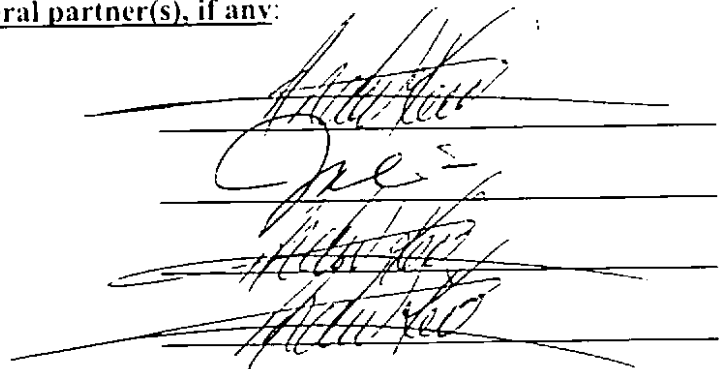
**Signature(s) of all new or dissociating general partner(s), if any:**

ANDREW KOURI, MEMBER OF KOURI INVESTMENTS, LP

JM ECHEMENDIA, CO TRUSTEE OF EXITING GP

A KORI, CO TRUSTEE OF EXITING GP

ANDREW KOURI, PRESIDENT OF NEW GP



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