

A15000000402

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

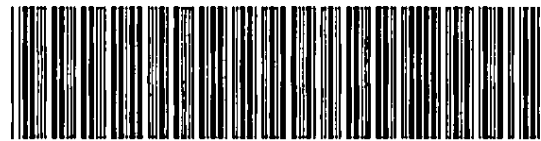
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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2021 FEB -1 PM 3:54
TALLAHASSEE, FL

O SIMMON
FEB 02 2021



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 4, 2020

MICHAEL GLEISSNER
4 TAYLOR ST
MILLBURN, NJ 07041-1385

SUBJECT: KIKUCHI WATSON FITZGERALD LLLP
Ref. Number: A15000000402

Done

Pls see
attached!

We have received your document for KIKUCHI WATSON FITZGERALD 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 registered agent must sign accepting the designation.

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.

Octavia L Simmons
Regulatory Specialist II Supervisor

Letter Number: 720A00024210

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Kikuchi Watson Fitzgerald 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:

Michael Gleissner
Contact Person

Kikuchi Watson Fitzgerald LLLP
Firm/Company

4 Taylor Street
Address

Millburn NJ 07041-1385
City, State and Zip Code

filing-US-FL@moas.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Gleissner at ()
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|---|--|---|
| <input checked="" type="checkbox"/> \$52.50 Filing Fee | <input type="checkbox"/> \$61.25 Filing Fee
and Certificate of
Status | <input type="checkbox"/> \$105.00 Filing Fee
and Certified Copy | <input type="checkbox"/> \$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

Kikuchi Watson Fitzgerald, 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 June 22, 2015, assigned Florida document number A15000000402, 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)

4 Taylor Street
Millburn NJ 07041-1385

New Mailing Address:
(May be post office box)

4 Taylor Street
Millburn NJ 07041-1385

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:

Michael Gleissner

New Registered Office Address:

1601 Harrison Street

Enter Florida street address

Hollywood, Florida 33020

City

Zip Code

LED

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.

Changing Registered Agent. Signature

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	<u>Michael Gleissner</u>	<u>246 West Broadway</u> <u>New York NY 10013</u> _____	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
_____	<u>Michael Gleissner</u>	<u>4 Taylor Street</u> <u>Millburn NJ 07041-1385</u> _____	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
_____	<u>Kaoru Gleissner</u>	<u>246 West Broadway</u> <u>New York NY 10013</u> _____	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
_____	<u>Kaoru Gleissner</u>	<u>4 Taylor Street</u> <u>Millburn NJ 07041-1385</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

☐ This Limited Partnership hereby elects to be a “Limited Liability Limited Partnership.”

☐ This Limited Partnership hereby removes its “Limited Liability Limited Partnership” status.

Page 2 of 3

F. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

2021 FEB -1 PM 3:54

RECEIVED
FEB 1 2021
STATE OF FLORIDA

Effective date, if other than the date of filing: October 14, 2020

(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

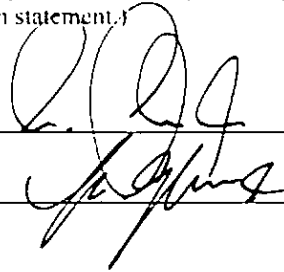
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.)*

Michael Gleissner

Kaoru Gleissner



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

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