A1500000596

(Requestor's Name)				
(Address)				
(Ac	(Address)			
(Ci	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Ві	usiness Entity Nan	ne)		
(Do	ocument Number)			
Certified Copies	_ Certificates	s of Status		
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COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Westbarry Associates, LTD. 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:				
Elaine Sontrago Contact Person Cornerstone Group Firm/Company				
Firm/Company Z100 Hollywood Blvd. Address				
Hollywood, FL 33020 City, State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Elaine Santiago at (954) 362-5700 Ext. S 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 \$61.25 Filing Fee and Certified Copy Status \$105.00 Filing Fee Certified Copy, and Certificate of Status				
STREET ADDRESS: Registration Section Division of Corporations MAILING ADDRESS: Registration Section Division of Corporations				
Clifton Building P. O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32301 Tallahassee, FL 32301				

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

West-bury As Insert name currently on file	e 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 9-73-7015, assigned Florida document number A 1500000596, 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 linhere:	imited partnership or limited liability limited partn	ership			
New name must be distinguisha	able and contain an acceptable suffix.				
Acceptable Limited Partnership suffixes: Limited Partnership Acceptable Limited Liability Limited Partnership suffixes: L. B. If amending mailing address and/or principal office address here:	Limited Liability Limited Partnership, L.L.L.P. or LLLP.	nd/or			
New Principal Office Address: (Must be STREET address)	ALL MIASS	15 NOV -5			
New Mailing Address: (May be post office box)	EE. FUITA	PH 2:04			
C. If amending the registered agent and/or registernew registered agent and/or the new registered office		of the			
Name of New Registered Agent:					
New Registered Office Address:	Enter Florida street address				
	, Florida				
	City 7in 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	Renistered	Agent	Signature	of New	Registered A	Agent
II CHARRINE	registeren	гъвсии,	Signature	OLITON	IXCEISTOICE 2	150111

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>			Address	T	pe of Action	
GP	Corresto	weetbury.	7100 Holl	Hollywood P	33020	Add Remove	
GP	Cognerstony	e hisethury	700 Holl	Hollywood I ywood, FL	31vd. 3302C	Add Remove	
						Add Remove	
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						Agging 2:	

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."
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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	ge(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 State.)	ne date this document is filed by the Florida Department of
Signature(s) of a general partner or all general par	rtners*:
(*NOTE: Only one current general partner is required to sign the removing a "limited liability limited partnership" election states when adding or removing a "limited liability limited partnership."	nent. Chapter 620, F.S., requires all general partners to sign
	Leon J. wolf &
	LAHE MASS
Signature(s) of all new or dissociating general part	tner(s), if any:
	1 1 Leon J. walls
	
Filing Fee: \$52.50	
Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	