## A16000000143

(Requestor's Name)						
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(Cit	y/State/Zip/Phone	e #)				
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## STRAUS & PATEL, P.A.

ATTORNEYS AND COUNSELORS AT LAW

118 WEST ORANGE STREET ALTAMONTE SPRINGS, FL 32714 TELEPHONE:

(407) 331-5505

FACSIMILE:

(407) 331-6308

December 15, 2016

Division of Corporations Registration Section Post Office Box 6327 Tallahassee, FL 32314

RE:

MSR 62<sup>nd</sup> AVE, LLLP conversion to MSR 62<sup>nd</sup> AVE, LP

Dear Sir:

Enclosed please find the original Certificate of Amendment for MSR 62<sup>nd</sup> AVE, LP, for filing, together with our firm's trust check in the amount of \$52.50 for the filing fee.

Thank you for your assistance in this matter.

Very truly yours,

Prabodh C. Patel

PCP:lpa Enclosures

## CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

MSR	62ND AVE, LLL	Ρ		
Insert name currently	on file with Florida Dep	artment of State		•
Pursuant to the provisions of section 620.120 limited liability limited partnership, whose control of the contr	ertificate was filed w d Florida document r	ith the Florida I numberA	Department of S \16000000043	state on
adopts the following certificate of amendmen	nt to its certificate of	limited partners	ship.	
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of here:	the limited partnersh	ip or limited liab	oility limited par	<u>rtnership</u>
MSR	62ND AVE, LP			
New name must be distir	nguishable and contain ar	acceptable suffix.		
Acceptable Limited Partnership suffixes: Limited Par Acceptable Limited Liability Limited Partnership suff			L.L.L.P. or LLLP.	
B. If amending mailing address and/or pr principal office address here:	incipal office addre	ss, <u>enter new n</u>	nailing address	and/or
New Principal Office Address: (Must be STREET address)				
New Mailing Address: (May be post office box)				
C. If amending the registered agent and/or renew registered agent and/or the new registered		ss on our record	ls, <u>enter the nar</u>	ne of the
Name of New Registered Agent:				
New Registered Office Address:			·	
	Enter F	lorida street addro Florida	-8 3	
_	City	, , , , , , , , , , , , , , , , , , , ,	Zip Code	

Page 1 of 3

## 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.

Signature of New Registered Agent

D.	If amending	the general	partner(s),	enter the	name and	<u>business</u>	address	of each	general	partner	being
<u>ade</u>	ded or remove	ed from our i	records:								

Title	Name	Address	Type of Action
<del></del>			_ Add _ Remove
	·		_ Add _ Remove
			Addi Remove
	·		Add The Refflore
			STATE ATE
			_

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 infor	mation, enter cl	hange(s) here: (Attach additional sheets, if necessary.)
	<del></del>	
	_ <del></del> _	
Effective date, if other than the dat (Effective date cannot be prior to nor mor State.)	e of filing: e than 90 days aft	er the date this document is filed by the Florida Department
Signature(s) of a general partner  (*NOTE: Only one current general partner moving a "limited liability limited partn when adding or removing a "limited liabil	er is required to si ership" election s	ign this document unless the limited partnership is adding or tatement. Chapter 620, F.S., requires all general partners to
when adding or removing a "timited habit	nty nimited parine	simp election statement.)
X Man		x About
x X		
		1
	<del></del>	
Signature(s) of all your or disposi	atina asnaval :	nartner(e) If any
Signature(s) of all new or dissoci	ating general	partner(s), it any:
	<del></del>	
Filing Fee:	\$52.50	
Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$8.75	
(36		SSE Comments
		OF S