## A 16000 000 656

(Re	questor's Name)	
(Address)		
— (Ad	dress)	
(Cit	y/State/Zip/Phone	<del>;</del> #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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## COVER LETTER

TO: Registration S Division of Co					
SUBJECT: AMTG HOLDINGS LLLP					
Nan	ne of Florida Limited Partn	ership or L	imited L	iability :	Limited Partnership
The enclosed Certific	ate of Amendment and	l fee(s) a	re subm	itted fo	or filing.
Please return all corre	espondence concerning	this mat	ter to:		
Jodi-Ann Wallace					
	Contact Person				
Joseph C. Kempe	·		<u> </u>		
	Firm/Company				
941 N. Highway A1A					
Address					
Jupiter, FL 33477					
С	ity, State and Zip Code				
jwallace@jckempe.com					
E-mail address: (to	be used for future annual re	port notifi	cation)		
For further information	on concerning this mat	ter, pleas	e call:		
Jodi-Ann Wallace		at ( <sup>561</sup>		747-73	00
Name of Contac	et Person		Code an	d Daytii	ne Telephone Number
Enclosed is a check f	or the following amou	nt:			
\$52.50 Filing Fee	□\$61.25 Filing Fee and Certificate of Status	□\$105.0 and Certi			□\$113.75 Filing Fee, Certified Copy, and Certificate of Status
Mailing Address: Registration Section Division of Corporat P.O. Box 6327 Tallahassee, FL 3231			The Ce 2415 N	ation S n of Co ntre of . Monr	

## CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

AMTG HOLDINGS LLLP	_			
Insert name cur	rently on f	le with Florida De	partment of State	
Pursuant to the provisions of section 620 limited liability limited partnership, who 11/22/2016, ass adopts the following certificate of amen	ose certifi igned Flo	icate was filed v orida document	vith the Florida Department number A16000000656	ship or of State on
This amendment is submitted to amend the f			ţţ	
A. If amending name, enter the new name	Ŭ	limited partners	nip or limited liability limite	d partnership
N/A				
New name must be	distinguis	hable and contain a	n acceptable suffix.	<del></del>
Acceptable Limited Partnership suffixes: Limite Acceptable Limited Liability Limited Partnerships	ip suffixes:	Limited Liability L	imited Partnership, L.L.L.P. or L	
B. If amending mailing address and/ principal office address here:	or princ	ipal office addr	ess, enter new mailing add	Iress and/or
New Principal Office Addr (Must be STREET address)	<u>dress:</u>	N/A		)20 OCT 2
New Mailing Address: (May be post office box)		N/A		6 M 8:2
C. If amending the registered agent and/oregistered agent and/or the new registere	or registe d office a	red office addres: <u>ldress here</u> :	s on our records, enter the na	[** <del> </del>
Name of New Registered Agent:	N/A			
New Registered Office Address:	N/A			
		Enter l	Florida street address	
	N/A		, Florida	<del></del>
		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.

<u>le</u>	<u>Name</u>	Address	Type of Action
	Ambrose Capital Partners, LLC	5050 Millwood Lane NW Washington D.C. 20016	☐ Add ☐ Remove
<del></del>			
			□ Add □ Remove
	ed partnership or limited liabilit rship" status, enter change here:	y limited partnership is ar	nending its "limite

F. If amending any other informa	ation, enter change(s	) here: (Attach additional sheets, if necessary.)
N/A		
Effective date, if other than the date of	of filing: N/A	
(Effective date cannot be prior to nor more to State.)	han 90 days after the de	ate this document is filed by the Florida Department of
	not meet the applicable	statutory filing requirements, this date will not
be used as the abeament's effective date of	the Department of State	e s records.
Signature(s) of a general partner of	<u>r all general partn</u>	ers*:
(*NOTE: Only one current general partner	is required to sign this o	document unless the limited partnership is adding or  Chapter 620, F.S., requires all general partners to sign
when adding or removing a "limited liability	/ limited partnership" el	ection statement.)
AMTG Management Inc.,		
By: 13h_		
Brian Shure, President		
Signature(s) of all new or dissociat	ing general partne	r(s), if any:
		<del></del>
Ambrose Capital Partners, LLC		
. 121.	<del></del>	
Ву: 131	<del></del>	
Brain Shure, Manager		
<b>~</b>	552.50	
	\$52.50 \$8.75	