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JAN OR ZOTS Y SULKER

COVER LETTER

TO: Registration Division of	Section Corporations			•
SUBJECT: BARAN	ACQUISITION DEVELO	OPMENT LLLP		
NOBSECT: N	ame of Florida Limited Par	tnership or Limited	Liability	Limited Partnership
The enclosed Certif	icate of Amendment a	nd fee(s) are subn	nitted	for filing.
Please return all con	respondence concernii	ng this matter to:		
MOISES BARAN VA	SQUESEZ			
	Contact Person		-	
	Firm/Company		-	
858 HONEYSUCKLE			_	
	Address			
ROCKLEDGE, FL 329	955 ———————————————————————————————————		_	
	City, State and Zip Code			
YBARAN@BARANI	DEVELOP.COM			
E-mail address: (t	o be used for future annual	report notification)	-	
For further informa	tion concerning this ma	atter, please call:		
MOISES VASQUEZ		at (³²¹)412-5	
Name of Cont	act Person	Area Code at	ıd Dayt	ime Telephone Number
Enclosed is a check	for the following amo	unt:		
□ \$52.50 Filing Fee	S61.25 Filing Fee and Certificate of Status			☐\$113.75 Filing Fee, Certified Copy, and Certificate of Status
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle		MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314		
Tallaharraa El 32		· caralle		+-

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP . OF

BARAN ACQUISITION DEVELOPMENT L	LLP		
Insert name currently on	file with Florida Department of State		
Pursuant to the provisions of section 620.1202, limited liability limited partnership, whose certi 06/09/2017, assigned F	ficate was filed with the Florida D	epartment of St	
adopts the following certificate of amendment to	o its certificate of limited partnersl	hip.	
This amendment is submitted to amend the following	:		
A. If amending name, enter the new name of the here:	limited partnership or limited liab	ility limited part	<u>nership</u>
BARAN GLOBAL LLLP			
New name must be distingui	shable and contain an acceptable suffix.		
Acceptable Limited Partnership suffixes: Limited Partner Acceptable Limited Liability Limited Partnership suffixes B. If amending mailing address and/or principal office address here: New Principal Office Address:	: Limited Liability Limited Partnership, i		
(Must be STREET address)	COCOA BEACH, FL 32931		
New Mailing Address: (May be post office box)	858 HONEYSUCKLE DR ROCKLEDGE, FL 32955	S AI	
C. If amending the registered agent and/or registered agent and/or the new registered off		s, <u>enter the nam</u>	e of the
Name of New Registered Agent:	-		
New Registered Office Address:			
	Enter Florida street addre	555	

City

			
Effective date, if other than the date of	of filing:		
Effective date cannot be prior to nor more t	than 90 days after the c	late this document is filed by	the Florida Department c
itate.) Note: If the date inserted in this block does r			s, this date will not
e listed as the document's effective date on	i the Department of Sta	te's records.	
Signature(s) of a general partner o	or all general <u>partr</u>	iers*:	
*NOTE: Only one current general partner	•		narmershin is adding or
emoving a "limited liability limited partners	ship" election statemen	it. Chapter 620, F.S., require	es all general partness to si
when adding or removing a "limited liability	y limited partnership e	nection statement.)	JAN
h. s			SSE STATE
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		<u>_</u>	= <u> </u>
NT CE			₩. 4.9
			
		-	
Signature(s) of all new or dissociati	ting general partne	er(s), if anv:	
· - · · · - · · · · · · · · · · · · · ·			
			
			<u> </u>
₽	852.50 852.50		