## A1800000386

(Red	questor's Name)	
(Add	dress)	-
(Add	dress)	
(City	//State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		

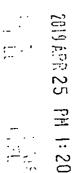


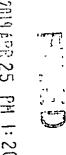


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R. WHITE MAY 0 7 2019





## COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: MAS LAND ENTITLEMENT FUND 2 . LP			
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:			
ALAN BENENSON			
Contact Person			
MAS LAND ENTITLEMENT FUND 2			
Firm/Company			
3323 NE 163RD STREET, PH-704			
Address			
NORTH MIAMI BEACH, FL 33160			
City. State and Zip Code			
ALAN@MASDEVELOPMENT.COM			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
ALAN BENENSON at ( 786 ) 753-9513			
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 ☐\$105.00 Filing Fee and Certified Copy and Certificate of Status	•		
STREET ADDRESS: MAILING ADDRESS:			
Registration Section Registration Section	<u> </u>		
	Division of Corporations		
Clifton Building P. O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314	P. O. Box 6327 Tallabassas, El. 32314		
Tallahassee, FL 32301			

# CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP AFR 25 PH 1: 20 OF TEMENT FUND 2. EP

### MAS LAND ENTITLEMENT FUND 2, LP

Insert name currently on file with Florida Department of Staté

	se certifica gned Flori	ite was filed da documen	with the Florida Department of State on tnumber A18000000386
adopts the following certificate of amend	lment to it	s certificate (	of limited partnership.
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name here:	e of the lin	nited partner	ship or limited liability limited partnership
New name must be o	distinguishal	ole and contain	an acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Acceptable Limited Liability Limited Partnership			
B. If amending mailing address and/o principal office address here:	r principa	al office add	ress, enter new mailing address and/or
New Principal Office Addi (Must be STREET address)	ress:		
New Mailing Address: (May be post office box)	- -		
C. If amending the registered agent and/onew registered agent and/or the new registered.			ress on our records, <u>enter the name of the</u> :
Name of New Registered Agent:	MLEF2-	GP, LLC	
New Registered Office Address:		Und m	Elemi Lenguaga e Llanca
	Enter Florida street address		
		City	, Florida 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.

If Changing Registered Agent, Signature of New Registered Agent

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>	Name	Address	Type of Action
GP	MAS Development, Corp.	3323 NE 163rd Street PH-704 North Miami Beach, FL 33160	□ Add Remove
GP	MLEF2-GP, LLC	3323 NE 163rd Street 19H-704 North Miami Beach, FL 33160	■ Add □ Remove
			□ Add □ Remove

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.

tNOTE: If adding or removing" limited liability limited partnership" status, all general partners must sign this amendment.)

F. If amending any other information, er	iter change(s) here: (Attach additional sheets, if necessary.)
Effective date, if other than the date of filing	March 1, 2019
State.)	ays after the date this document is filed by the Florida Department of
Note: If the date inserted in this block does not meet be listed as the document's effective date on the Department.	the applicable statutory filing requirements, this date will not artment of State's records.
Signature(s) of a general partner or all ge	neral partners*:
	ed to sign this document unless the limited partnership is adding or etion statement. Chapter 620, F.S., requires all general partners to sign partnership" election statement.)
Alan Benenson Oll L	
	<del> </del>
Signature(s) of all new or dissociating gen	eral partner(s), if any:
Alan Benenson Ul	
,	
Filing Fee: \$52.50	
Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	