Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000349500 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BLALOCK, WALTERS, HELD & JOHNSON, P.A.

Account Number : 076666003611 : (941)748-0100

Fax Number : (941)745-2093

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please

trn @blalockwalters.com

LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION STAR CREEK, LLLP

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$52.50

DEC 1 1 7019

A. LUN

Electronic Filing Menu

Corporate Filing Menu

Help

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

	Star Creek, LLLP			
Insert name currently	on file with Florida Depart	ment of State	-	
Pursuant to the provisions of section 620.120 limited liability limited partnership, whose control 11/15/2018 assigned		n the Florida De	epartment of State on	
adopts the following certificate of amendment	nt to its certificate of li	mited partnersh	ip.	
This amendment is submitted to amend the follow	wing:			
A. If amending name, enter the new name of there:	he limited partnership (or limited liabili	ty limited partnership	
	Star Creek, LP			
New name must be distin	iguishable and contain an a	cceptable suffix.	() () () () () () () () () ()	
Acceptable Limited Partnership suffixes: Limited Partnership suff Acceptable Limited Liability Limited Partnership suff B. If amending mailing address and/or pr principal office address here:	ixes: Limited Liability Limi	ted Partnership, L	CO. 34	
New Principal Office Address: (Must be STREET address)				
New Mailing Address: (May be post office box)				
C. If amending the registered agent and/or reg new registered agent and/or the new registered		n our records, <u>e</u>	nter the name of the	
Name of New Registered Agent:				
New Registered Office Address:	Entar Flor	rida street addre.	66	
Linei I wiiaa sii eet aaai ess				
		, Florida _		
	City		Zin 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:

Title	Name	Address	Type of Action	
			☐ Add ☐ Remove	
	•		☐ Add ☐ Remove	
			Add & Remove	
			□ Add Remove	
			Add Remove	
			☐ Add ☐ Remove	

- E. If the liwited 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.)

				-	
			<u>_:</u>	· ·	-
ffective date, if other than the date ffective date cannot be prior to nor more	e of filing: e than 90 days after th	e date this document is fl	led by the Florid	a Depar	tment oj
ate.) ote: If the date inserted in this block doe	s not meet the applical	ble statutory filing require	ments, this date	will not	
e listed as the document's effective date	on the Department of S	State's records.			
ignature(s) of a general partner	or all general nas	-tners*•			
_			to all or a management for	مناطقه منا	
* <u>NOTE:</u> Only one current general partner emoving a "limited liability limited partn	er is required to sign th tership" election statem	is document unless the line ent. Chapter 620, F.S., re	nited partnership quires all genera	is addir. Partner	ig or 's to sign
then adding or removing a "limited liabil	lity limited partnership	" election statement.)			
	1.0				
Eureka Properties, LLLP, as Gener	ral Partner		<u>. </u>		
y: /			1 n o	8	
Auram Weissman, as its General	al Partuer		<u></u>	33	
		_ .	· · · · · · · · · · · · · · · · · · ·	5	:
		 	Sign		<u> </u>
				**	·
			05	من	
Signature(s) of all new or dissoci	anng general dari	neris) ii anv:	£	en	
			, ,		
			· · · · · · · · · · · · · · · · · · ·		
		,		_	
	· · · · · · · · · · · · · · · · · · ·	 			
Filing Fce:	\$52.50				
Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$8.75				

Page 3 of 3