## A21000000015

Office Use Only



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## **COVER LETTER**

TO: Registration 5 Division of C				
SUBJECT: Aerospac	e Business Park, LLLP			
Nai	e Business Park, LLLP me of Florida Limited Part	nership or Limite	d Liability	Limited Partnership
The enclosed Certific	cate of Amendment ar	id fee(s) are sub	omitted t	for filing.
Please return all corr	espondence concernin	g this matter to	):	
David Lasser				
	Contact Person		<del></del>	
Aerospace Business Park	c, LLLP			
	Firm/Company			
11943 NW 37th Street				
	Address		_	
Coral Springs, Florida 32	3065			
	City, State and Zip Code			
davidlasser@hotmail.co	m			
E-mail address: (to	be used for future annual	report notification	)	
For further informati	on concerning this ma	tter, please cal	l:	
David Lasser		at ( 305	510-0	341
Name of Contact	ct Person		and Dayt	ime Telephone Number
Enclosed is a check f	for the following amou	unt:		
■ \$52.50 Filing Fee	☐\$61.25 Filing Fee and Certificate of Status	□\$105.00 Fili and Certified C		☐\$113.75 Filing Fee, Certified Copy, and Certificate of Status
Mailing Address: Registration Section Division of Corporat P.O. Box 6327 Tallahassee, FL 323		Regis Divis The ( 2415	Centre o N. Mon	

## CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

Aerospace Business Park, LLLP	
Insert name currently on file	e with Florida Department of State
1/07/2021, assigned Flor	rate was filed with the Florida Department of State on rida document number A21000000015
adopts the following certificate of amendment to i	ts certificate of fimited partnership.
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the line	mited partnership or limited liability limited partnership
New name must be distinguisha	able and contain an acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Partnershi Acceptable Limited Liability Limited Partnership suffixes: L	
B. If amending mailing address and/or princip principal office address here:	al office address, enter new mailing 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 registered registered agent and/or the new registered office add	d office address on our records, <u>enter the name of the new</u> lress here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	$\omega_{ii}$

## 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>	<u>Name</u>	Address	Type of Action
	Lee S. Lasser Family Ltd Partn	1943 NW 37# Streets Comb Springs FC 33065	
	No 5	Coral Springs, FL 33065	Add Remove
	<del></del>		☐ 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.

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

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ffective date, if other than the date of Tective date cannot be prior to nor more to ate.)	than 90 days after the d	ite this document is fit	ed by the Florida Departme	ent of
ote: If the date inserted in this block does to be listed as the document's effective date on	not meet the applicable	statutory filing require	ments, this date will not	
2 fisted as the document's effective date on	i me Department of Stat	e s records.		
ignature(s) of a general partner o				
*NOTE: Only one current general partner emoving a "limited liability limited partners then adding or removing a "limited liability	ship" election statement	. Chapter 620, F.S., re		
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				•
		<u> </u>		
	ing general partne	r(s), if any:		
Signature(s) of all new or dissociat	ing general partne	r(s), if any:		
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Signature(s) of all new or dissociat	ing general partne	r(s), if any:		——————————————————————————————————————
Signature(s) of all new or dissociate  Trust Little, Ruth  Filing Fee:	ing general partne	r(s), if any:		——————————————————————————————————————