A21000000327

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COVER LETTER

1	Registration S Division of C	Corporations			_
SURJE	CT· \	JMB Martin	47	Investme	into LLLP
3013013	Na Na	me of Florida Limited Part	inership or	Limited Liability	Limited Partnership
		cate of Amendment an			for filing.
Please r	eturn all coπ	espondence concernin	ig this ma	atter to:	
		Contact Person White Investme Firm/Company			
	2255 68	m Ave S	<u>_</u>	<u>-</u>	
		Address			
	saint Pete	CISOUTY FL, 3	33712	<u>. </u>	
E-n	mbmurt nail address: (to	we 2 investments be used for future annual	eport noti	fication)	
For fur	her informat	ion concerning this ma	atter, plea	ase call:	
Ad	irienne V	lartinez_	_at (4	07 <u>) 48</u>	5-0773
	Name of Conta		Are	ea Code and Dayt	ime Telephone Number
Enclose	ed is a check	for the following amo	unt:		
\$52.5	0 Filing Fee	☐\$61.25 Filing Fee and Certificate of Status		5.00 Filing Fee rtified Copy	□\$113.75 Filing Fee, Certified Copy, and Certificate of Status
Registr Divisio P.O. Bo	g Address: ation Section on of Corpora ox 6327 assee, FL 323	tions			Section Corporations of Tallahassee proe Street, Suite 810

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

	INVESTMENTS, LLLP	
Insert name currently on	file with Florida Department of State	
limited liability limited partnership, whose certi	Florida Statutes, this Florida limited partnership or ficate was filed with the Florida Department of State on lorida document number A2100000327, o its certificate of limited partnership.	
This amendment is submitted to amend the following	y.	
A. If amending name, enter the new name of the here:	e limited partnership or limited liability limited partnershi	Б
New name must be distingui	ishable and contain an acceptable suffix.	
Acceptable Limited Partnership suffixes: Limited Partner Acceptable Limited Liability Limited Partnership suffixes	rship, Limited, L.P., LP, or Ltd. s: Limited Liability Limited Partnership, L.L.L.P. or LLLP.	
B. If amending mailing address and/or principal office address here:	cipal office address, enter new mailing address and/o	<u>r</u>
New Principal Office Address: (Must be STREET address)	28	()
New Mailing Address: (May be post office box)	ZI AUG II AN SEE	7
C. If amending the registered agent and/or registered agent and/or the new registered office a	ered office address on our records, enter the name of the ne	<u>w</u>
Name of New Registered Agent:		•
New Registered Office Address:	Enter Florida street address	
	, Florida	
 -	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
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
<u>G</u> _	Joel Martinez	2255 UST AVES St. Petersburg, FI 33712	_ □ Add _ ☑ Remove
			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.)

State.)	ore than 90 days after the date this document is filed oes not meet the applicable statutory filing requiren	
removing a "limited liability limited part	er or all general partners*: tner is required to sign this document unless the lim tnership" election statement. Chapter 620, F.S., requility limited partnership" election statement.)	
Allarting		
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<u>.</u>		
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		- 1 6 1 6 1 6 F
Signature(s) of all new or dissoc	ciating general partner(s), if any:	UG II AM
Signature(s) of all new or dissoc	ciating general partner(s), if any:	3211 - [
Signature(s) of all new or dissoc	ciating general partner(s), if any:	3211 - [
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