0644 A2100

	(Requestor's Name)	-
	(Address)	<u>-</u>
	(Address)	
	(City/State/Zip/Phone #)	
PICK-U	P WAIT	MAIL
	(Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of S	Gtatus
Special Instructions to Filing Officer:		

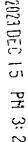
Office Use Only



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MAR 1 4 2024 K. Brumbley

COVER LETTER

TO:	Registration S Division of C				
SUBJ	ECT: Starfishla	ne Family Limited Partner	ship		
•		me of Florida Limited Part		ited Liabil	ity Limited Partnership
The e	nclosed Certific	cate of Amendment an	d fee(s) are:	submitted	d for filing.
Please	e return all corr	espondence concerning	g this matter	to:	
Anthor	ny and Marissa Ci	sneros			
		Contact Person			
Starfish	hlane Family Limi	ited Partnership			
		Firm/Company			
11300	SW 68th Ct.				
		Address			
Pinecre	st, Fl. 33156				
	C	ity, State and Zip Code			
acisne	ros3089@gmail.c	om			
E	-mail address: (to	be used for future annual re	port notification	<u>(ac</u>	
For fu	rther information	on concerning this mat	ter, please ca	all:	
Anthon	y J Cisneros		at (⁷⁸⁶	7191	223
	Name of Contac	t Person	_ \	de and Day	time Telephone Number
Enclos	sed is a check f	or the following amou	nt:		
\$ 52.	50 Filing Fee	☐\$61.25 Filing Fee and Certificate of Status	□\$105.00 Fi and Certified		☐\$113.75 Filing Fee, Certified Copy, and Certificate of Status
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Fallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

CERTIFICATE OF AMENDMENT CERTIFICATE OF LIMITED PARTNERSHIP OF

		Or		
STARFISHLANE FAMILY LIMIT	ED PARTNEI	RSHIP		
Insert name cu	rrently on file	with Florida Dep	partment of State	
Pursuant to the provisions of section 62 limited liability limited partnership, wh NOVEMBER 17, 2021 , ass	ose certifica	ate was filed w		
adopts the following certificate of amer	ndment to it	s certificate of	limited partnership.	
This amendment is submitted to amend the	following:			
A. If amending name, <u>enter the new name</u> here:	me of the lin	nited partnersh	ip or limited liability limited	partnership
New name must be	c distinguishal	ble and contain a	acceptable suffix.	 .
Acceptable Limited Partnership suffixes: Limite Acceptable Limited Liability Limited Partnersh				LP.
B. If amending mailing address and/ principal office address here:	or principa	al office addre	ess, <u>enter new mailing addr</u>	ess and/or
New Principal Office Ad-	dress:	11300 SW 68th (Ot.	<u>—</u>
(Must be STREET address)		Pinecrest, Fl. 331	56	
New Mailing Address: (May be post office box)	-	11300 SW 68th (Pinecrest, Fl. 331		- -
	-	_ -		
C. If amending the registered agent and/or the new registered	or registered d office addr	office address ess here:	on our records, <u>enter the nam</u>	e of the new
Name of New Registered Agent:				_
New Registered Office Address: 11300 SW 68th Ct.		20		
		Enter F	lorida street address	7023 DEC
	Pinecrest		, Florida <u>33156</u>	
		City	Zip Code	5 = 2
				<u> </u>
				· မှ က
	Page	e 1 of 3		2
	Ü			

New Registered Agent's Signature, if changing Registered Agent:

nereby accept the appointment as registered agent and agree to act in this capacity. I further agree to
comply with the approximation as registered agent and agree to act in this capacity. I further agree to
mply will the provisions of all statutes relative to the proper and complete performance of my duties, and I
n familiar with and accept the obligations of my position as registered agent.
The conference of the 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>GP</u>	Leonor Lopez	460 Loretto Ave. Coral Gables, Fl. 33143	_ □ Add □ Remove
<u>GP</u>	Anthony J Cisneros	8570 SW 127th Street Miami, Fl. 33156	_
			
			_
			_
			_

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

This Limited Partnership hereby removes its "Limited Liability Limited Partnership" status.

F. If amending any other information, ento	er change(s) here: (Attach additional sheets, if necessary.)
Effective date, if other than the date of filing:	Filing date
State.)	s after the date this document is filed by the Florida Department of
Note: If the date inserted in this block does not meet the be listed as the document's effective date on the Departs	e applicable statutory filing requirements, this date will not ment of State's records.
•	
Signature(s) of a general partner or all gene	
(*NOTE: Only one current general partner is required removing a "limited liability limited partnership" election when adding or removing a "limited liability limited partnership".	to sign this document unless the limited partnership is adding or on statement. Chapter 620, F.S., requires all general partners to sign rtnership" election statement.)
THE STATE OF THE S	
MHRISSA CISNEAGS-ENAIGUEZ GENERAL PAATNER	
Signature(s) of all new or dissociating genera	al partner(s), if any:
<i>j</i> , <i>j</i>	
Venus yez	
DISSOCIATING ECNERAL PARTNER	
letter have	
ANTHONY J. CISNERUS	
NEW GENERAL PARTNER	
Filing Fee: \$52.50 Certified Copy (optional): \$52.50	
Certificate of Status (optional): \$8.75	