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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Division of C				
	•			
SUBJECT: No.	echtman Law Firm, LLLP me of Florida Limited Par	rtnerchin or Limited L	iability	Limited Partnership
INA	me of Florida Ellinted Fal	rulership or thinned t	лаонну	Clinited Partnership
The enclosed Certifi	cate of Amendment a	nd fee(s) are subm	itted (for filing.
Please return all corr	espondence concerni	ng this matter to:		
Anthony Hevia				
	Contact Person			
Hevia Hechtman Law F	irm, LLLP			
	Firm/Company			
2525 Ponce de Leon Bly	d. Suite 300			
	Address		•	
Coral Gables, FL, 33134	,			
(City, State and Zip Code	····	•	
anthony@hevialawfirm	.com			
E-mail address: (to	be used for future annual	report notification)		
For further informati	on concerning this ma	atter, please call:		
Anthony Hevia		at (786	441-5	120
Name of Conta	ct Person	_ `	d Dayti	ime Telephone Number
Enclosed is a check	for the following amo	unt:		
\$52.50 Filing Fee	☐\$61.25 Filing Fee and Certificate of Status	□\$105.00 Filing and Certified Cop		☐\$113.75 Filing Fee, Certified Copy, and Certificate of Status
Mailing Address: Registration Section		Street /		
Division of Corporat	ions	Registra Divisio		orporations
P.O. Box 6327	-			f Tallahassee
Tallahassee, FL 323	14			roc Street, Suite 810
		Tallaha	ssee l	71, 32303

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

FILED

2024 AUG 20 AM 8: 55

SECRETARY OF STATE
IALLAHASSEE. FLORIDA

Hevia Hechtman Law Firm LLLP

', ·

Insert name currently on file with Florida Department of State

Pursuant to the provisions of section 620.12 limited liability limited partnership, whose of	certificate was filed	with the Florida Department of State on
December 28, 2023 , assigne	ed Florida document	number A2300000668
adopts the following certificate of amendme	ent to its certificate of	of limited partnership.
This amendment is submitted to amend the follow	wing:	
A. If amending name, <u>enter the new name of here</u> :	f the limited partners	hip or limited liability limited partnership
Hevia Hechtman Baldwin LLLP		
	inguishable and contain	an acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Pa Acceptable Limited Liability Limited Partnership sug		
B. If amending mailing address and/or p principal office address here:	rincipal office addi	ress, 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 represented agent and/or the new registered offi	gistered office addres ice address here:	s on our records, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter I	Florida street address
		Florida
_	City	, Florida Zip Code
	-	•

•		

	here: (Attach additional sheets, if necessary.)
Effective date, if other than the date of filing: August 1, 202	
(Effective date cannot be prior to nor more than 90 days after the da. State.)	te this document is filed by the Florida Department of
Note: If the date inserted in this block does not meet the applicable s be listed as the document's effective date on the Department of State	tatutory filing requirements, this date will not s'records.
Signature(s) of a general partner or all general partne	<u>rs*:</u>
(*NOTE: Only one current general partner is required to sign this do removing a "limited liability limited partnership" election statement, when adding or removing a "limited liability limited partnership" elections.	Chapter 620, F.S., requires all general partners to sign
	E T
Anthony Haria	ANG 20
Anthony Heria General Partner	SEE T
Anthony Heria General Partner	
Anthony Havia General Partner Signature(s) of all new or dissociating general partner	O AM 8: 55 SEE FLORIDA
Anthony Heria General Partner Signature(s) of all new or dissociating general partner	O AM 8: 55 SEE FLORIDA
_	O AM 8: 55 SEE FLORIDA
	O AM 8: 55 SEE. FLORIDA

Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75