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lo:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : MEDEIROS SOUZA CORP

Account Number : I20190000068 Phone : (407)326-8484 Fax Number : (407)604-6519

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

Email Address: contact@medeirossouza.com

# LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION LIVE USA INVESTMENTS LP

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### **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: LIVE USA INVESTMENTS LP		
Name of Florida Limited Partn	ership or Limited Li	iability Limited Partnership
The enclosed Certificate of Amendment and	l fee(s) are subm	itted for filing.
Please return all correspondence concerning	this matter to:	
RUBEM SOUZA		
Contact Person		
MEDEIROS SOUZA CORP		
Firm/Company		
1711 AMAZING WAY STE 213		
Address		
OCOEE, FL, 34761		
City, State and Zip Code		
contact@medeirossouza.com		
E-mail address: (to be used for future annual re	port notification)	
For further information concerning this matter	ter, please call:	
RUBEM SOUZA	at (407	3268484
Name of Contact Person		d Daytime Telephone Number
Enclosed is a check for the following amoun	ıt:	
■ \$52.50 Filing Fee	S105.00 Filing I and Certified Copy	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Division The Cer 2415 N.	address: ation Section of Corporations attree of Tallahassee Monroe Street, Suite 810 assee, FL 32303

#### Page: 4 of 6 To:

## CERTIFICATE OF AMENDMENT CERTIFICATE OF LIMITED PARTNERSHIP



LIVE USA INVESTMENTS LP Insert name currently on file with Florida Department of State Pursuant to the provisions of section 620.1202, Florida Statutes, this Florida limited partnership or limited liability limited partnership, whose certificate was filed with the Florida Department of State on , assigned Florida document number A24000000108 adopts the following certificate of amendment to its certificate of limited partnership. This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited partnership or limited liability limited partnership here: LIFE USA INVESTMENTS LP New name must be distinguishable and contain an acceptable suffix. Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP. B. If amending mailing address and/or principal office address, enter new mailing address and/or principal office address here: 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 office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

City

, Florida

From: RUBEM SOUZA

	FILE
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## 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>	Name	Address	Type of Action
			☐ Add☐ Remove
			□ Add □ Remove
			☐ Add ☐ Remove
			☐ Add
			☐ Add
			☐ 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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Effective date, if other than the d	ate of filing:	
State.) Note: If the date inserted in this block o	loes not meet the applicable statutor	document is filed by the Florida Department of y filing requirements, this date will not
pe listed as the document's effective da	te on the Department of State's reco	rds.
Signature(s) of a general partn	er or all general partners*;	
	tnership" election statement. Chapt	nt unless the limited partnership is adding or ter 620, F.S., requires all general partners to sign statement.)
Chalda Christian DS	3	
<u> Jedda Christina R S</u>		
	<del></del>	
Signature(s) of all new or disso	ciating general partner(s), if	anv:
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Gedda Christina R S	Saeger	· · · · · · · · · · · · · · · · · · ·
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Certificate of Status (optional):		