# A24121

(Requestor's Name)			
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PICK-UP WAIT MAIL			
(Dualinga Fath, Nama)			
(Business Entity Name)			
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#### **COVER LETTER**

Division o	on Section f Corporations		
SUBJECT: Holida	y Plaza Associates, LTD		
		artnership or Limited L	iability Limited Partnership
	ificate of Amendment		
	orrespondence concern		
Brittany Johnston			
	Contact Person		
The Morgan Compani	es		
	Firm/Company		
13024 Ballantyne Corp	Pl, Ste 500		
	Address		
Charlotte, NC 28277			
	City, State and Zip Code	<del>-</del>	
bjohnston@themorgan	1cos.com		
E-mail address: (t	o be used for future annual	report notification)	
For further informa	tion concerning this m	atter, please call:	
Brittany Johnston		at ()	909-4511
Name of Cont	act Person	Area Code and	Daytime 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 Fo and Certified Copy	ce
Mailing Address: Registration Section Division of Corpora C.O. Box 6327 Fallahassee, FL 323	tions	Division of The Central 2415 N. N	Idress: on Section of Corporations re of Tallahassee Monroe Street, Suite 810 ee, FL 32303

# CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP8: 20 OF

Holiday Plaza Associates, LTD		
Insert name currently of	n file with Florida	Department of State
Pursuant to the provisions of section 620.1202 limited liability limited partnership, whose cer January 29, 1987 , assigned adopts the following certificate of amendment	tificate was file Florida docume	d with the Florida Department of State on not number A24121
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of there:	ne limited partne	rship or limited liability limited partnership
New name must be disting	uishable and contai	n an acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Partne Acceptable Limited Liability Limited Partnership suffixe	ership, Limited, L.F 25: Limited Liability	P., LP, or Ltd.  Limited Partnership, L.I.I.P. or LLLP.
B. If amending mailing address and/or print principal office address here:		
New Principal Office Address: (Muss be STREET address)		
New Mailing Address: (May be post office box)		
C. If amending the registered agent and/or registered agent and/or the new registered office a	ered office addre address here:	ss on our records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter	Florida street address
	City	, 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 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>Titte</u>	<u>Name</u>	Address	Type of Action
<u>GP</u>	Holiday Park Plaza, Inc.	5900 N Andrews Ave Ste 410 Ft. Lauderdale, FL 33309	_
<u>GP</u>	Partners, INC.	5900 N Andrews Ave Ste 410 Ft Lauderdale, FL 33309	_ ■ Add □ Remove
			_ □ Add □ Remove
	<del></del>		☐ 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.)

Effective date, if other than the date of filing: Janu	uary 1, 2020
State.)	fter the date this document is filed by the Florida Department of
Note: If the date inserted in this block does not meet the ap be listed as the document's effective date on the Department	oplicable statutory filing requirements, this date will not
as the desired are on the peparine	in of state s records.
Signature(s) of a general partner or all genera	l partners*:
(*NOTE: Only one current general partner is required to s	sign this document unless the limited partnership is adding or
when adding or removing a "limited partnership" election s	statement. Chapter 620, F.S., requires all general partners to sign ership" election statement.)
•	
Tent Por	George A. Morgan, JR, President of Florida Prope Investment Partners, Inc
	Investment Partners, Inc
Signature(s) of all new or dissociating general p	
regranded by or an new or dissociating general t	
The state of the s	George A. Morgan Je
1/2	Park Plaza, Inc.
	rain ruza, inc.
iling For	
iling Fee: \$52.50 Pertified Copy (optional): \$52.50	
ertificate of Status (optional): \$8.75	