

Division of Corporations

# AZS416

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : KATZ BASKIES LLC  
Account Number : I20080000071  
Phone : (561)910-5700  
Fax Number : (561)910-5701

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

Email Address: jerome.wolf@katzbaskies.com

## LP/LLP AMENDMENT/RESTATEMENT/CORRECTION

**ALI R. GHARAMANI, M.D. INVESTMENT LIMITED PARTNERSH**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$52.50

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D. SCOTT

MAR 1 2017

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Ali R. Ghahramani M.D. Investment Limited Partnership  
Name of Florida Limited Partnership or Limited Liability Limited Partnership

The enclosed Certificate of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Jerome L. Wolf

Contact Person

Katz Baskies & Wolf PLLC

Firm/Company

2255 Glades Road Suite 240W

Address

Boca Raton, FL 33431

City, State and Zip Code

jerry.wolf@katzbaskies.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jerome Wolf

Name of Contact Person

at ( 561 ) 910-5700

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$52.50 Filing Fee

☐ \$61.25 Filing Fee  
and Certificate of  
Status

☐ \$105.00 Filing Fee  
and Certified Copy

☐ \$113.75 Filing Fee,  
Certified Copy, and  
Certificate of Status

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

FILED  
17 FEB 28 AM 9:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**CERTIFICATE OF AMENDMENT  
TO  
CERTIFICATE OF LIMITED PARTNERSHIP  
OF**

Ali R. Ghahramani M.D. Investment Limited Partnership

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 12/31/1987, assigned Florida document number A25416, 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:**

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*

\_\_\_\_\_, Florida  
City

\_\_\_\_\_  
Zip Code

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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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
GP	Ali R. Ghahramani	DECEASED	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
GP	Ali R. Ghahramani REVOCABLE TRUST	DECEASED	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
GP	Darius J. Ghahramani	7223 Ayrshire Lane Boca Raton, FL 33496	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
GP	Andrew A. Ghahramani	720 NE 32nd Street Boca Raton, FL 33431	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
GP	Yasmin S. Fleming	221 Pine Tree Road Radnor, PA 19087	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> 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.)


F. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Effective date, if other than the date of filing:


*(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)*

Signature(s) of a general partner or all general partners\*:

(\*NOTE: Only one current general partner is required to sign this document unless the limited partnership is adding or removing a "limited liability limited partnership" election statement. Chapter 620, F.S., requires all general partners to sign when adding or removing a "limited liability limited partnership" election statement.)

✓   
DARIUS J. GHAHRAMANI AS  
CO-PERSONAL REPRESENTATIVE OF  
THE ESTATE OF ALI. R. GHAHRAMANI

Signature(s) of all new or dissociating general partner(s), if any:

✓   
DARIUS J. GHAHRAMANI

  
ANDREW A. GHAHRAMANI

✓   
YASMIN S. FLEMING

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