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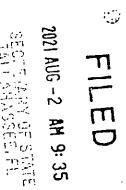
(Requestor's Name)						
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COVER LETTER

TO:	Registration S Division of Co				
SURI	FCT. Beach Car	rs of West Palm Limited I	artnership		
3000	Nar	ne of Florida Limited Par	tnership or Limited I	Liability	Limited Partnership
The e	nclosed Certific	ate of Amendment ar	nd fee(s) are subn	nitted fo	or filing.
Please	e return all corre	espondence concernir	ng this matter to:		
Joseph	D. Lieberman				
<u> </u>		Contact Person		_	
c/o Ch	arles T. Weiss, P.A	i.		_	
		Firm/Company			
712 U.	S. Highway One, S	Suite 301-2		_	
		Address			
North	Palm Beach, FL 33	3408			
	C	ity, State and Zip Code		_	
	413@aol.com			_	
F	E-mail address: (to	be used for future annual	report notification)		
For fi	irther information	on concerning this ma	itter, please call:		
Joseph D. Lieberman			at (⁵⁶ 1	848-99	270
	Name of Contac	t Person	_ \	nd Daytii	me Telephone Number
Enclo	sed is a check f	or the following amo	unt:		
☐ \$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	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, 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

Beach Cars of West Palm Limited Partn	ership				
Insert name currer	ıtly on file	with Florida De	epartment of State	_	
Pursuant to the provisions of section 620. limited liability limited partnership, whose August 12, 1992, assig	e certific	ate was filed	with the Florida D		te on
adopts the following certificate of amenda	nent to it	s certificate o	of limited partnersl	hip.	
This amendment is submitted to amend the following	owing:				
A. If amending name, enter the new name	of the lir	nited partners	ship or limited liab	oility limited partn	<u>iership</u>
<u>here</u> :					
					انون ^{د.}
New name must be di	stinguisha	ble and contain	an acceptable suffix.		
Acceptable Limited Partnership suffixes: Limited I Acceptable Limited Liability Limited Partnership s				LLLP. or LLL	
B. If amending mailing address and/or	princip	al office add	ress, enter new m	nailing addre st a	ndof
principal office address here:	FF				O
New Principal Office Addre (Must be STREET address)	: <u>ss:</u>			: 35	. •
(Mat N. D. N. 22) Mark (SS)				-	
New Mailing Address:					
(May he post office box)					
C. If amending the registered agent and/or registered agent and/or the new registered o			s on our records, <u>e</u>	nter the name of t	<u>he new</u>
Name of New Registered Agent:	John J. N	1ercurio			
New Registered Office Address:					
	Enter Florida street address				
			, Florida j		
		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: Type of Action <u>Address</u> Title Name | GP John F. Mercurio P.O. Box 15707 ☐ Add West Palm Beach, FL 33416 Remove GP John J. Mercurio 1441 North Military Trail ■ Add West Palm Beach, FL 33409 ☐ Remove ☐ Add ☐ Remove □ 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.)

F. If amending any other information, enter cha	ange(s) here: (Attach additional sheets, if necessary.)
1300	· · · · · · · · · · · · · · · · · · ·
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.) Note: If the date inserted in this block does not meet the appli	
be listed as the document's effective date on the Department of	of State's records.
Signature(s) of a general partner or all general p	artners*:
(*NOTE: Only one current general partner is required to sign removing a "limited liability limited partnership" election stat	
when adding or removing a "limited liability limited partners!	
$\mathcal{M}\mathcal{N}$	
	
Signature(s) of all new or dissociating general pa	artner(s), if any:
$\Delta \mathcal{V}$	
	
Filing Fee: \$52.50	
Certified Copy (optional): \$52.50	
Certificate of Status (optional): \$8.75	