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COVER LETTER

TO: Registration S Division of Co		C	
SUBJECT: Name	216M Family Form	ly Enterprise	Limited Partnership
[Vall	icor Florida Elimited Fartii	ersjiip or railited Flaority	tainted rathership
The enclosed Certific	ate of Amendment and	I fee(s) are submitted f	or filing.
Please return all corre	espondence concerning	this matter to:	
Allan D	Mezrah_		
Mezrah	Contact Person Terminy Contact Firm/Company	terprises Ltd	
2708 W	. Aziele St	reat	
Tampa.	The 3362	9	
C	The 3362 ity, State and Zip Code	<u> </u>	
E-mail address: 00	@ apl. com be used for future annual re	port notification)	
For further information	on concerning this mat	ter, please call:	
Dana Gov (t Person	/	me Telephone Number
	or the following amour		me recognisite (validos
\$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 Corporati Clifton Building 2661 Executive Center	ons	MAILING A Registration S Division of C P. O. Box 632 Tallahassee, I	Section orporations 27
Tallahassee, FL 3230		i wiiwiiwooo, i	۱ <i>د سول</i> به

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

Merran	Family Ent	Trouses, Ltd
	Insert name currently on file with	h Florida Department of State

Insert name current	ly on file with	Florida Department	of State		
Pursuant to the provisions of section 620.12 limited liability limited partnership, whose 912 1492, assign	certificate wed Florida d	vas filed with the ocument number	Florida Der	partment of St キャ	
adopts the following certificate of amendment	ent to its cer	tificate of limited	d partnership	p.	
This amendment is submitted to amend the follo	wing:				
		(\cdot, \cdot)		Property.	-
New name must be dist	tinguishable ar	nd contain an accepta	able suffix.		
Acceptable Limited Liability Limited Partnership su	ıffixes: Limitea	nited, L.P., LP, or Lt I Liability Limited Pa	d. arthership, L'I	L.E.P. or. LLLP.	·.
B. If amending mailing address and/or principal office address here:	orincipal of	fice address, <u>ent</u>	er new mai	iling address	and/or
New Principal Office Addres	<u>s:</u>			FAL	201
(Must be STREET address)				工产	200 Do TO 200
New Mailing Address: (May be post office box)				ARY OF STA	APP 27 CEL
			ur records,	enter the nam	e of the
Name of New Registered Agent:					
New Registered Office Address:					
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 receive registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address address and a street address address.	treet address				
		·	_, Florida	lip Code	
	Ci	ty	Z	пр Соае	

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 added or removed from		name and business address of e	ach general partner being
<u>Title</u>	Name	Address	Type of Action
General Porther	Tack M. Mezrah Allan D. Mezrah	5007 San Mighel Tampa, FL 33629	_ □ Add _ □ Remove
General Ewher	Allan D. Megrah	2708 W. Azeele St Tampa F1 33609	_ 🗹 Add _ 🔾 Remove
			_ □ Add _ □ Remove
			_
			2010 APR 27 PM 5: A CALLEGE TARY LONG A CALLEG
	rtnership or limited liability ' status, enter change here:	limited partnership is amend	10/ 10/ 1-
□ This Limited P	artnership hereby elects to be	a "Limited Liability Limited Pa	rtnership."
☐ This Limited P	artnership hereby removes its	"Limited Liability Limited Par	tnership" status.

(NOTE: If adding or removing" limited liability limited partnership" status, all general partners must sign this amendment.)

				
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		<u> </u>	7	· !
Effective date, if other than the date of filing:	the date this document	is filed by the Florida We	narimen	<u> </u>
egjective date cannot be prior to nor more than 90 days afte. State.)	the date this document	s filed by the Florida ve	الب الب	10)(_
Note: If the date inserted in this block does not meet the appl	icable statutory filing re	equirements, this date will	not-	
e listed as the document's effective date on the Department				
Signature(s) of a general partner or all general p	nartners*:			
rightature(s) of a general partner of an general	Jul theis t			
*NOTE: Only one current general partner is required to sig	n this document unless	the limited partnership is a	adding o	r
emoving a "limited liability limited partnership" election sta	tement. Chapter 620, F	.S., requires all general pa		
when adding or removing a "limited liability limited partners	hip" election statement.)		
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Arnice Mexich, General Pourtne	1 x comme	e ruez	al	
				
		V		
				
Signature(s) of all new on dissociating general n	outnow(o) if one			
Signature(s) of all new or dissociating general p	artner(s), it any:	/		
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Filing Fee: \$52.50				
Certified Copy (optional): \$52.50				
Certificate of Status (optional): \$8.75				