A93000000473

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

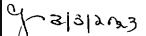




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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Mu.	skat Family	Limited	Parti	iership 93-II	
SUBJECT: Muskat Family Limited Partnership 93-II Name of Florida Limited Partnership or Limited Liability Limited Partnership					
The enclosed Certifi	cate of Amendment a	ind fee(s) are sub	mitted	for filing.	
Please return all corr	espondence concerni	ng this matter to			
Phillip	Muskat Contact Person				
Musket Famil	y Limited Partn Firm/Company	enship 93-1	Ξ		
	S.W 133 Ta				
. rodiesy					
Miami, FL 33176 City, State and Zip Code					
C	City, State and Zip Code		_		
m	15Katma	0 x0/- c0:	11		
E-mail address: (to be used for future annual report notification)					
For further informati	on concerning this ma	atter, please call:			
Phillip N	luskat	_at (_305	12-	53-0000	
Name of Contac	et Person	Area Code a	nd Dayt	ime Telephone Number	
Enclosed is a check f	or the following amor	unt:			
□ \$52.50 Filing Fee	□\$61.25 Filing Fee and Certificate of Status	□\$105.00 Filing and Certified Cop		S113.75 Filing Fee, Certified Copy, and Certificate of Status	
Mailing Address:		Street	Addre	ss:	
Registration Section		Registration Section			
Division of Corporations		Division of Corporations			
P.O. Box 6327		The Centre of Tallahassee			
Tallahassee, FL 3231	4			roe Street, Suite 810	
		Tallaha	issee F	FL 32303	

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

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2022 DEC 13 PM 4: 03

Muskat Family L	tly on file with Florida Department of State MALLY TO SEE, FL
Insert namé curren	dy on file with Florida Department of State
limited liability limited partnership, whose	202, Florida Statutes, this Florida limited partnership or certificate was filed with the Florida Department of State on led Florida document number A9300000 473, lent to its certificate of limited partnership.
This amendment is submitted to amend the following	owing:
A. If amending name, enter the new name of here:	of the limited partnership or limited liability limited partnership
New name must be dis	tinguishable and contain an acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Pa Acceptable Limited Liability Limited Partnership su	artnership, Limited, L.P., LP, or Ltd. ffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.
B. If amending mailing address and/or principal office address here:	orincipal office address, enter new mailing address and/or
New Principal Office Address (Must be STRFET address)	<u>S:</u>
New Mailing Address: (May be post office box)	
C. If amending the registered agent and/or re registered agent and/or the new registered off	gistered office address on our records, <u>enter the name of the new</u> ice address here:
Name of New Registered Agent:	Phillip Muskat
New Registered Office Address:	10775 S.W. 133 Terrace Enter Florida street address
-	Miami Florida 33176 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:

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- 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 chan	ge(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 State.)	TANJEVY 1, 2023 ne date this document is filed by the Florida Department of
Note: If the date inserted in this block does not meet the applica be listed as the document's effective date on the Department of S	ble statutory filing requirements, this date will not State's records.
Signature(s) of a general partner or all general par	rtners*:
(*NOTE: Only one current general partner is required to sign the removing a "limited liability limited partnership" election statem when adding or removing a "limited liability limited partnership	his document unless the limited partnership is adding or ment. Chapter 620, F.S., requires all general partners to sign
Miniman Wushat	
Miniam Muskat Raynohat Pedo Muskat	
Signature(s) of all new or dissociating general part	ner(s), if any:
Midul Alest	
Michael Abest	

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

\$52.50

\$8.75