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*L P Amend*

03/14/22-- 01034-- 018 \*\*52.50

2022 MAR 14 PM 12 48  
STATE OF MISSISSIPPI  
DEPARTMENT OF REVENUE

FILED

A. RAMSEY  
APR - 5 2022

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ARONOFF FAMILY 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:

Andrew K. Fein, Esq  
Contact Person  
Minerley Fein, P.A.  
Firm Company  
1200 N. Federal Hwy, Ste. 420  
Address  
Boca Raton, FL 33432  
City, State and Zip Code  
Drew@minerleyfein.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Andrew K. Fein at ( 561 ) 362-6699  
Name of Contact Person 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


**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



**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	LAHJ MANAGEMENT LLC	4392 James Estate Court Lake Worth, Florida 33467 (Document No. L21000122419)	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
GP	ROSALYN CRANE	4522 Hazelton Lane Lake Worth, Florida 33449	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
GP	ANNETTE MORD	4392 James Estate Court Lake Worth, Florida 33449	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
GP	HERBERT ARONOFF	6771 Fiji Circle Boynton Beach, Florida 33437	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
GP	JOEL ARONOFF	759 East Rambling Drive Wellington, Florida 33417	<input type="checkbox"/> Add <input checked="" 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.)*

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**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.)*

Annette Mord  
ANNETTE MORD, General Partner

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

\_\_\_\_\_  
LAHJ MANAGEMENT, LLC, a Florida limited liability company

By: Annette Mord, as Manager

Annette Mord

\_\_\_\_\_  
\_\_\_\_\_

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