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To:

Division of Corporations

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From:

Account Name : MACFARLANE FERGUSON & MCMULLEN

Account Number : 076077001654 Phone : (813)273-4229

Phone : (813)273-4229 Fax Number : (813)273-4396

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

Email Address:___

TARY OF STATE

LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION HEILMAN FAMILY LIMITED PARTNERSHIP

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M. SOLOMON APR 1 7 2023

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CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

Insert name currently on S		rtment of State	
Pursuant to the provisions of section 620.1202, I limited liability limited partnership, whose certifications of the provisions of section 620.1202, I limited liability limited partnership, whose certificate of amendment to a section of the provisions of the provi	ficate was filed wi	th the Florida Department of St umber A9400000061	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the		p or limited liability limited part	nership
here:			بازی سر میرون
New name must be distinguis	hable and contain an	acceptable suffix.	-
Acceptable Limited Partnership suffixes: Limited Partners Acceptable Limited Liability Limited Partnership suffixes:	ship, Limited, L.P., L. Limited Liability Lin	P, or Ltd. nited Partnership, L.L.L.P. or LLLP.	
B. If amending mailing address and/or princ principal office address here:	ipal office addre	ss, enter new mailing address	and/or
New Principal Office Address: (Must be STREET address)			
New Mailing Address; (May be post office bax)			
C. If amending the registered agent and/or registered agent and/or the new registered office a	red office address (ldress here:	on our records, <u>enter the name of</u>	the nev
Name of New Registered Agent:			
New Registered Office Address:	Enter Fl	orida street address	
		, Florida	
	Clty	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>	Name	Address	Type of Action		
General P	Robert E. Heilman, Jr.	2343 Kings Point Drive Largo, FL 33774	□ Add ■ Remove	63	
General P	Sheri K. Heilman	2343 Kings Point Drive Largo, FL 33774	_ Add _ Cl Remove	2023 APR 14	Ti
			_	Ph (OF S	LED
			_ □ Add _ □ Remove	3: 11 DPID/	_
			_ □ 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.)

(((H23000140335 3)))

Effective date, if other than the date of filing: Effective date cannot be prior to nor more than 90 days after trace.)	the date this document is filed by the Florida Department of
Note: If the date inserted in this block does not meet the application is the document's effective date on the Department o	
a listed as the document s effective date on the Department o	i Sano a focoles.
<u>Signature(s) of a general partner or all seneral p</u>	artnera*:
*NOTE: Only one current general partner is required to sign	this document unless the limited partnership is adding or
emoving a "limited liability limited partnership" ejection state hen adding or removing a "limited liability limited partnersh	ement. Chapter 620, F.S., requires all general partners to sign hip" election statement.)
S W/	APR 14
Den K Nulmen	E的 PR
By: Sherl K. Heilman, General Parater	Say =
<u> </u>	
gnature(s) of all new or dissociating general par	rmerie) if any
The state of the s	EDICIONAL PACT.
Ten & Helme	
By / Shori K. Heilman, General Partner	
Syn K. Helittal, General Parties	
Dent Kelman	
and the second of the second o	
the Estate of Robert E. Heilman, Jr., Deceased	
the Estate of Robert E. Heilman, Jr., Deceased	
By: Sheri K. Heilman, Personal Representative of the Estate of Robert E. Heilman, Jr., Deceased Filling Fee: \$52.50 Certified Copy (optional): \$52.50	

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