A94000000813

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(Address)		
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(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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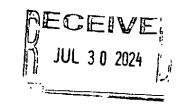
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97/98/24--01008--005 **\$2.50

ENTERNATION PM 4: 07

COVER LETTER				
TO: Registration Division of C				
SUBJECT: CRUZ-G	OVIN INVESTMENTS,	LTD		
Na Na	me of Florida Limited Par	tnership or Limited Liabilit	y Limited Partnership	
The enclosed Certificate of Amendment and fee(s) are submitted for filing.				
Please return all corr	espondence concernir	ng this matter to:		
LUIS CRUZ				
	Contact Person			
CRUZ-GOVIN INVEST	TMENTS, LTD			
	Firm/Company			
5560 CURRY FORD RO	DAD			
	Address			
ORLANDO, FL 32822				
(City, State and Zip Code			
LCRUZMD@AOL.CO	М			
E-mail address: (to	be used for future annual	report notification)		
For further informati	on concerning this ma	atter, please call:		
STEVEN H NATURMA	AN	305 670-8	3353	
Name of Contact	ct Person	at () Area Code and Dayt	ime Telephone Number	
Enclosed is a check t	for the following amou	·	·	
■ S52.50 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:		Street Addre	ess:	
Registration Section		_	Registration Section	
Division of Corporations P.O. Box 6327			Division of Corporations The Centre of Tallahassee	
		THE CEIME O	i i alialiassee	





FLORIDA DEPARTMENT OF STATE Division of Corporations

July 17, 2024

LUIS CRUZ 5560 CURRY FORD ROAD ORLANDO, FL 32822

SUBJECT: CRUZ-GOVIN INVESTMENTS, LTD.

Ref. Number: A9400000813



We have received your document for CRUZ-GOVIN INVESTMENTS, LTD. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a current general partner, if any, and by each newly designated general partner(s).

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability limited partnership must have an active registration/filing on file with this office before this filing can be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan Regulatory Specialist III

Letter Number: 824A00015644

www.sunbiz.org

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP

FILED 2024 JUL 30 PM 4: 07

CRUZ-GOVIN INVESTMENTS, LTD

Insert name currently on file with Florida Department of State LAHASSEE. FLORIDA	
	Λ.

insert name currently on in	The With Florida Department of State LAHASSEE. FLORIDA
• • • • • • • • • • • • • • • • • • • •	lorida Statutes, this Florida limited partnership or cate was filed with the Florida Department of State on orida document number A94000000813
adopts the following certificate of amendment to	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the l here:	imited partnership or limited liability limited partnership
New name must be distinguish	nable and contain an acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Partnersh Acceptable Limited Liability Limited Partnership suffixes: 1	
B. If amending mailing address and/or principal office address here:	pal office address, enter new mailing address and/or
New Principal Office Address:	
(Must be STREET address)	
New Mailing Address: (May be post office hox)	
C. If amending the registered agent and/or registere registered agent and/or the new registered office ad-	ed office address on our records, enter the name of the new dress here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Florida
	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:

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
GP	LUIS CRUZ-GOVIN	5560 CURRY FORD ROAD ORLANDO, FL 32822	_
<u>GP</u>	TITUSVILLE INV PTRS,LLC	5560 CURRY FORD ROAD ORLANDO, FL 32822	_ ■ 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.

	-
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 State.) Note: If the date inserted in this block does not meet the applicable statutory filing required listed as the document's effective date on the Department of State's records.	
of inseed as the document a creceive date on the Department of State 5 feedings.	
Signature(s) of a general partner or all general partners*:	
(*NOTE: Only one current general partner is required to sign this document unless the removing a "limited liability limited partnership" election statement. Chapter 620, F.S., when adding or removing a "limited liability limited partnership" election statement.)	limited partnership is adding or requires all general partners to sig
Titusville Investment Partvir, LLC	
<u> </u>	- 5
Luis Cruz, MANIGER	DZ4 J
Luis Cruz, MANIGER Dydnin lung	ML 30
Signature(s) of all new or dissociating general partner(s), if any:	
Idrami Prz	U ↓: 07 iAle orrida
De Mis On Gowin	
Filing Fee: \$52.50	
Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	