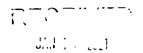
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(Reques	itor's Name)	
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PICK-UP	WAIT	MAIL
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MAR 03 2021 S. YOUNG

COVER LETTER *

TO:	Registration S Division of C				
SURI	ECT: GENPAT	H, LTD			
5000	Nar	ne of Florida Limited Partn	ership or Limited L	iability	Limited Partnership
The er	nclosed Certific	ate of Amendment and	l fee(s) are subm	itted fo	or filing.
Please	return all corre	espondence concerning	this matter to:		
Anthor	iy LaMarca				
	-	Contact Person			
GENPA	ATH, LTD				
		Firm/Company			
4011 N	orth Federal Hwy				
	-	Address			
Fort La	uderdale, FL 3330	08			
	С	ity, State and Zip Code			
directo	or@therafirst.com				
E-	-mail address: (to l	be used for future annual re	port notification)		
For fu	rther information	on concerning this mat	ter, please call:		
Anthon	iy LaMarca		at (954	56442	22
-	Name of Contac	t Person		d Daytir	ne Telephone Number
Enclos	sed is a check f	or the following amour	nt:		
S \$52.	50 Filing Fee	☐\$61.25 Filing Fee and Certificate of Status	S105.00 Filing and Certified Cop.		☐\$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			

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

GENPATH, LTD

Insert name currently of	on file with Florida De	epartment of State
Pursuant to the provisions of section 620.1202 limited liability limited partnership, whose ce 06/30/1995, assigned adopts the following certificate of amendment	rtificate was filed Florida document	with the Florida Department of State on number A95000000988,
		innice particismp.
This amendment is submitted to amend the followi	ng:	
A. If amending name, enter the new name of there:	he limited partners	ship or limited liability limited partnership
New name must be disting	guishable and contain	an acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Partn Acceptable Limited Liability Limited Partnership suffix		
B. If amending mailing address and/or pri principal office address here:	ncipal office addı	ress, enter new mailing address and/or
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 agent and/or the new registered office		s on our records, <u>enter the name of the new</u>
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:	Enter i	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	11
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
GP	RYAN LAMARCA	4011 N FEDERRAL HWY Fort Lauderdale, FL 33308	_ 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.)

F. If amending any other info	rmation, en	ter change(s)) here: (Attach	additional she	ets, if necessary.)
					<u> </u>
	<u> </u>			-	
Effective date, if other than the da (Effective date cannot be prior to nor mo State.) Note: If the date inserted in this block do be listed as the document's effective date	ore than 90 da	ys after the da ne applicable s	tatutory filing re		
be used as the document's effective date	. on the Depar	unem of State	s records.		
Signature(s) of a general partner	r or all gen	eral partne	<u> </u>		
(*NOTE: Only one current general partiremoving a "limited liability limited partirement adding or removing a "limited liability".	nership" elect	ion statement.	Chapter 620, F	.S., requires all s	ership is adding or general partners to sign
Othy La Marca					
	<u></u>				
				_	
Signature(s) of all new or dissoci	iating gene	ral partner	(s), if any:	-	
Ryan La Marca					
					· •
	· · · · · · · · · · · · · · · · · · ·				
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75				