

A9600000737

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

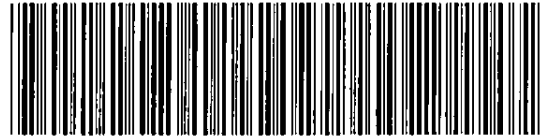
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

Office Use Only



400436202814

09/12/24--01009--004 *61.25

FD
FBI:46
STATE
OFF

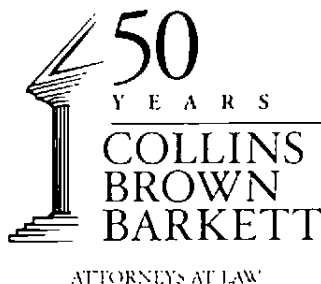
S. HUNT
08/12/24

Bruce D. Barkett *
Jonathan D. Barkett
Lisa Thompson Barnes **
Gregg M. Casalino
Aaron V. Johnson
Taylor Kennedy Lubas **
C. Douglas Vitunac

Jessica F. Herstatt
Paul O'Neil
Megan N. Root

OF COUNSEL
George G. Collins, Jr.
Ralph L. Evans
Michael J. Garavaglia *
Steven L. Henderson
P. Todd Kennedy *

Calvin B. Brown (1968-2024)
William W. Caldwell (1964 - 2023)



756 Beachland Boulevard Vero Beach, Florida 32963
Post Office Box 643686 Vero Beach, Florida 32964-3686

1. Board Certified Real Estate
2. Master Of Laws Taxation
3. Master Of Laws Real Property Development
4. Master Of Laws Estate Planning & Elder Law
5. Certified Circuit Mediator
6. Also Admitted In The Commonwealth Of The Bahamas
7. Master Of Business Administration

September 4, 2024

Registration Section
Division of Corporations
Florida Department of State
P. O. Box 6327
Tallahassee, Florida 32314

Re: The Lazar Family Limited Partnership

Dear Sir:

Enclosed please find a Certificate of Amendment to Certificate of Limited Partnership for the above-named entity. I would appreciate your filing the original with your office and providing me with a certificate of status.

I am also enclosing our check in the amount of \$61.25 covering the following:

Filing Fee	\$ 52.50
Certificate of Status	8.75

Thank you for your consideration in this matter.

Very truly yours,

Taylor K. Lubas
(ma)
Taylor Kennedy Lubas

TKL/ma
Enclosures

PHONE: 772.231.4343 | FAX: 772.234.5213 | WWW.VEROLAW.COM

REAL PROPERTY LAW & REAL ESTATE CLOSINGS • PLANNING, ZONING, LAND USE LAW • WILLS, TRUSTS, & ESTATE PLANNING
CIVIL & BUSINESS TRIAL PRACTICE • CORPORATE & BUSINESS ORGANIZATION • CONSTRUCTION LAW • CONDOMINIUM & HOA LAW • GUARDIANSHIP
PERSONAL INJURY & WRONGFUL DEATH • PROBATE & TRUST ADMINISTRATION • DIVORCE & FAMILY LAW • TAX LAW

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Lazar 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:

Taylor Kennedy Lubas, Esq.

Contact Person

Collins Brown Barkett, Chartered

Firm/Company

756 Beachland Boulevard

Address

Vero Beach, FL 32963

City, State and Zip Code

tlubas@verolaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Margie Averill

at (772) 231-4343

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

**CERTIFICATE OF AMENDMENT
TO
CERTIFICATE OF LIMITED PARTNERSHIP
OF**

THE LAZAR FAMILY LIMITED PARTNERSHIP

Insert name currently on file with Florida Department of State

Pursuant to the provisions of section 620.1202, Florida Statutes, this Florida limited partnership or limited liability limited partnership, whose certificate was filed with the Florida Department of State on 04/17/1996, assigned Florida document number A96000000737, adopts the following certificate of amendment to its certificate of limited partnership.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited partnership or limited liability limited partnership here:

New name must be distinguishable and contain an acceptable suffix.

Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.

Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.

B. If amending mailing address and/or principal office address, enter new mailing address and/or principal office address here:

New Principal Office Address:
(Must be *STREET* address)

8785 W Orchid Island Circle #201
Vero Beach, FL 32963

New Mailing Address:
(May be post office box)

8785 W Orchid Island Circle #201
Vero Beach, FL 32963

C. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Kristi Lazar

New Registered Office Address:

8785 W Orchid Island Circle #201

Enter Florida street address

Vero Beach

City

Florida 32963

Zip Code

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.

K. Lazar

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>
<u>Gen Ptnr</u>	<u>Lazar, Kristi</u>	<u>8785 W Orchid Island Circle #201</u> <u>Vero Beach, FL 32963</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>Gen Ptnr</u>	<u>Lazar, Lester</u>	<u>1340 Winding Oaks Circle West</u> <u>Vero Beach, FL 32963</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u> </u>	<u> </u>	<u> </u> <u> </u>	<input type="checkbox"/> Add <input type="checkbox"/> Remove
<u> </u>	<u> </u>	<u> </u> <u> </u>	<input type="checkbox"/> Add <input type="checkbox"/> Remove
<u> </u>	<u> </u>	<u> </u> <u> </u>	<input type="checkbox"/> Add <input type="checkbox"/> Remove
<u> </u>	<u> </u>	<u> </u> <u> </u>	<input type="checkbox"/> Add <input type="checkbox"/> Remove
<u> </u>	<u> </u>	<u> </u> <u> </u>	<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.)

K. Lazar

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

2012 SEP 12 PM 12:46
DEPT OF STATE
TALLAHASSEE FL
D

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