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A96000002101

1. Entity Name

THE EDITH A. BERLIN FAMILY LIMITED PARTNERSHIP # 🔍

AUG 15 PM 12: 17

Principal Plac 7167 VIA PAL BOCA RATON		:	Mailing Ad 7167 VIA BOCA RA		ŢALL <i>I</i>	MITARY OF STATA	. 8	
2. Principal Place of Business 3. Mailing Address			Address			<u> </u>	BB\$ B    B\$\$    D    BB\B    EB\   BB\	
Suite, Apt. #, etc.		Suite, Ap	Suite, Apt. #, etc.		DUE BY SEPTEMBER 26, 2001			
City & Stat	City & State City & State			ate		4. FEI Number 65-0714039 Applied F		
Zip		Country	Zip	Соц	intry	5. Certificate of Sta	tus Desired	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent			jent		7. Name and Addr	ess of New Registered	Agent	
BERLIN, EDITH A 7167 VIA PALOMAR BOCA RATON FL 33433				Name Street Address (P.O. Box Number is Not Acceptable)				
					City		Fi	Zip Code
8. The above	named entity	submits this sta	tement for the purpose	of changing its registe	ered office or registe	ered agent, or both, in the	he State of Florida.	
SIGNATURE .	Signature, typed	or printed name of regis	tered agent and title if applicable	. (NOTE: Registe	red Agent signature requir	ed when reinstating)	DATE	
9. Capital Co as Shown	on record.	\$621,0	in	nount of Capital Cont FLORIDA to date. 🦸	621,075.	.00		OR FEE INFORMATION
	A:G NOTE:	ENERAL PAR General Parti	TNER THAT IS A BI ters MAY NOT be cl	JSINESS:ENTITY:	MUST <sup>:</sup> BE:REGIS m: an amendme	STERED AND ACTIVE	/E`WITH THIS`OFFIC change a general p	CE. artner.
12.		<u> </u>	PARTNER INFORMATION				DDRESS CHANGES OF	
DOCUMENT # EDITH A. BERLIN, TRUSTEE		ST	REET ADDRESS					
STREET ADDRESS CITY-ST-ZIP	7167 VIA I BOCA RAT	PALUMAH ION FL 33433		ÇIT	TY-ST-ZIP			
DOCUMENT #		†		ST	REET ADDRESS			
STREET ADDRESS CITY-ST-ZIP		<u> </u>		Cn	TY-ST-ZIP	600	-08/17/010	<b>3760</b> )1014022
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STREET ADDRESS.  CITY-ST-ZIP	<u> </u>	1		CIT	TY-ST-ZIP			
	certify that the	information supp	olied with this filing does	not qualify for the ex	temption stated in S	Section 119.07(3)(i), Flor	rida Statutes. I further co	ertify that the information

SIGNATURE: