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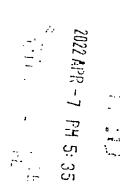
(Requestor's Name)		
(Add	dress)	
(Address)		
(Cit	y/State/Zip/Phone #	‡)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Name	e)
(Do	cument Number)	
Certified Copies	Certificates o	of Status
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Special Instructions to	Filing Officer:	
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COVER LETTER

	Registration S Division of C			/		
		JOSEPH LE	Vy	Partnershi	P, Ltd.	
SUBJE	OT:Nar	ne of Florida Limited Par	tnership	or Limited Liabili	ty Limited Partnership	
The encl	osed Certific	cate of Amendment ar	nd fee(s) are submitted	for filing.	
Please re	eturn all corre	espondence concernir	ng this	matter to:		
	Ma	rcia Beck				
		Contact Person				
_	Firm/Company					
	33 Sidney 91.					
	Brookl	Yn N Y (1) City, State and Zip Code	20	1		
	ICla.l. B	eck/29mail.co	M			
E-m	ail address: (to	be used for future annual	report r	otification)		
		on concerning this ma				
Marcia Beck		at (at (7/8) 624-1335			
	Name of Conta	ct Person		Area Code and Day	ytime Telephone Number	
Enclose	d is a check t	for the following amo	unt:			
☐ \$52.50) Filing Fee	S61.25 Filing Fee and Certificate of Status		105.00 Filing Fee Certified Copy	☐\$113.75 Filing Fee, Certified Copy, and Certificate of Status	
	Address:			Street Add		
Registration Section			Registration Section			
	n of Corporat	lions		Division of Corporations		
P.O. Box 6327		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810				
Tallaha:	ssee, FL 323	14		Taliahassee		
				i ananassee	, L L JZJVJ	

CERTIFICATE OF AMENDMENT

то

CERTIF	CATE OF	LIMITED OF	PARTNERSH ZUZZ AP K	-/ PH 5	35
JOSEPH	LEVY	PARTI	VERSHIP,	Ltd:	<u> </u>

Insert name currentl	y on file with Florida Department of State
limited lightlity limited partnership, whose	02, Florida Statutes, this Florida limited partnership or certificate was filed with the Florida Department of State on ed Florida document number <u>A96000002446</u> , ent to its certificate of limited partnership.
This amendment is submitted to amend the follo	
A. If amending name, enter the new name o here:	f the limited partnership or limited liability limited partnership
New name must be dist	inguishable and contain an acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Pa Acceptable Limited Liability Limited Partnership su	irmership, Limited, L.P., LP, or Ltd. ffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.
B. If amending mailing address and/or principal office address here:	orincipal office address, enter new mailing address and/or
New Principal Office Address (Must be STREET address)	S:
New Mailing Address: (May be post office box)	yo Marcia beck 33 Gidney Place Brooklyn, My (no)
C. If amending the registered agent and/or registered agent and/or the new registered of	egistered office address on our records, <u>enter the name of the new</u> fice address 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:

2022 RPR -7 PH 5: 35

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>	Address	Type of Action
Mrs.	gabrielle Levy	60 East End Ave. NY, NY 10028	_ □ Add _ □⁄ Remove
<u>M3.</u>	Marcia Beck	33 Sidneyrl. Diookly NY 11201	Add Remove
Mr:	Jack Levy	S20 5th AVE NY, NV 10005	_
i <u>Mr. </u>	Edward Levy	321 Georgica Kond East tampton, 1/4	_ □ Add □ Remove
149.	Lovise Lavy	50 Fast 89 MSt =116 NY, NY 10128	D'Add □ Remove
M	Josephhery	Deceased	_ □ 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 information, enter	change(s) here: (Attach additional sheets, if necessary.)
	2022 APR -7 PH 5: 35
Effective date, if other than the date of filing:	
(Effective date cannot be prior to nor more than 90 days State)	after the date this document is filed by the Florida Department of
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 Departm	nent of State's records.
Signature(s) of a general partner or all gener	ral partners*:
(*NOTE: Only one current general partner is required to removing a "limited liability limited partnership" election	o sign this document unless the limited partnership is adding or n statement. Chapter 620, F.S., requires all general partners to s
when adding or removing a "limited liability limited part	
11 0 1	
Marua Berk	
Signature(s) of all new or dissociating genera	al partner(s), if any:
	/
——————————————————————————————————————	A)
Marie Gerlet	11 mm
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Col Would France	rapple of
Filing Fee: \$52.50	,
Certified Copy (optional): \$52.50	
Certificate of Status (optional): \$8.75	