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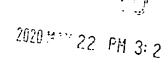
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## **COVER LETTER**

TO: Registration S Division of Co				
SUBJECT: Nan	Wiah Fami	Limited Liability	tartnership.	
The enclosed Certificate of Amendment and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to:				
Elain Cariati Contact Person Cariati Family Limited Partnership. Firm/Company				
115'1 High!	land Ave 5	X 10		
Cheshire CT Occ410  City, State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Cain Ca Name of Contac	C(A+1)	_at ( <u>Spo</u> ) <u>Q</u> Area Code and Dayti	me 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 Corporat P.O. Box 6327 Tallahassee, FL 3231		Street Addre Registration S Division of C The Centre of 2415 N. Mon Tallahassee, I	Section Forporations FTallahassee roe Street, Suite 810	

## CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP



Cariati Family Limited Partnership
Insert name currently on file with Florida Department of State

limited liability limited partnership, whos	.1202, Florida Statutes, this Florida limited partnership or se certificate was filed with the Florida Department of State on gned Florida document number
adopts the following certificate of amend	ment to its certificate of limited partnership.
This amendment is submitted to amend the following	llowing:
A. If amending name, enter the new name here:	e of the limited partnership or limited liability limited partnership
New name must be o	distinguishable and contain an acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Acceptable Limited Liability Limited Partnership	Partnership, Limited, L.P., LP, or Ltd. suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.
B. If amending mailing address and/or principal office address here:	r principal office address, enter new mailing address and/or
New Principal Office Addr (Must be STREET address)	ress:
New Mailing Address: (May be post office box)	
C. If amending the registered agent and/or registered agent and/or the new registered	r registered office address on our records, <u>enter the name of the new office address here</u> :
Name of New Registered Agent:	Elain Cariati
New Registered Office Address:	5930 Bay Cooy Dr #1104 Enter Florida street address
	Naples , Florida 34109 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>	Address	Type of Action
	Donald Carriati 11	8930 Bay (0long) 1104 Na Dies Fl 34108	D □ Add Remove
	Erica Mahar	3-17 Oregon Road Chesnera, CT	<b>∑</b> Add □ Remove O
			☐ Add ☐ Remove
			☐ 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.

(NOTE: If adding or removing" limited liability limited partnership" status, all general partners must sign this amendment.)

F. If amending any other information, en	nter change(s) here: (Attach additional sheets, if necessary.)
	41.150
Effective date, if other than the date of filing (Effective date cannot be prior to nor more than 90 d State.)	ays after the date this document is filed by the Florida Department of
<b>Note:</b> If the date inserted in this block does not meet be listed as the document's effective date on the Dep.	the applicable statutory filing requirements, this date will not artment of State's records.
Signature(s) of a general partner or all ge	neral partners*:
(*NOTE: Only one current general partner is requiremoving a "limited liability limited partnership" ele when adding or removing a "limited liability limited	ed to sign this document unless the limited partnership is adding or ction statement. Chapter 620, F.S., requires all general partners to sign partnership" election statement.)
4. Cont	
Enica Maher	
Signature(s) of all new or dissociating ger	neral partner(s), if any
MA ADMANTE	
9011011	
Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	