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A. RAMSEY
JUN √ . 2024

COVER LETTER

то:	Registration S Division of Co	orporations		
SUBJ	ECT: SSF OF F	LORIDA ELLP		
	Nan	ne of Florida Limited Partn	ership or Limited I	Liability Limited Partnership
The er	iclosed Certific	ate of Amendment and	fee(s) are subm	nitted for filing.
Please	return all corre	spondence concerning	this matter to:	
NICOL	ETTE TSAMBIS	SMITH		
		Contact Person		•
SSF OI	F FLORIDA LLLE			
		Firm/Company		
832 SC	OUTH FLORIDA A			
		Address		
LAKE	LAND, FL 33801	— <u></u>		
		ty. State and Zip Code		
	@all-injuries.com			
E-	-mail address: (to f	be used for future annual re	port notification)	
For fu	rther information	on concerning this matt	er, please call:	
NICOLETTE TSAMBIS SMITH 31 (863			at (⁸⁶³)688-7766
	Name of Contac	t Person		d Daytime Telephone Number
Enclos	sed is a check fo	or the following amour	nt:	
S \$52	.50 Filing Fee	☐\$61.25 Filing Fee and Certificate of Status	□\$105.00 Filing and Certified Cop	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Registra Divisio The Ce 2415 N	Address: ation Section n of Corporations ntre of Tallahassee . Monroe Street, Suite 810 ssee, FL 32303	

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

FILED

2024 HAY 24 PM 12 41

SSF OF FLORIDA LLLP		SEC 41109 of 1999
Insert name currently on	file with Florida Department of State	THE SHAPSEE ELOPIS
Pursuant to the provisions of section 620.1202, limited liability limited partnership, whose certi MAY 12, 1997, assigned F	ficate was filed with the Florida	Department of State on
adopts the following certificate of amendment to		
This amendment is submitted to amend the following	y.	
A. If amending name, enter the new name of the here:	limited partnership or limited lia	ibility limited partnership
New name must be distingui	ishable and contain an acceptable suffix	<u> </u>
Acceptable Limited Partnership suffixes: Limited Partner Acceptable Limited Liability Limited Partnership suffixes		o, L.L.L.P. or LLLP.
B. If amending mailing address and/or princ principal office address here:	cipal office address, <u>enter new</u>	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 registe registered agent and/or the new registered office a		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street add	
	vner r wriaa street aaa	TON
	, Florida <i>Cit</i> y	Zip Code
	= 1 T	

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 Ag	ent, Signature of New Registered Agent

D. If amending the general partner(s), <u>enter the name and business address of each general partner being added or removed from our records</u>:

<u>Title</u>	Name	Address	Type of Action
GENERA	H GUY SMITH	832 SOUTH FLORIDA AVE LAKELAND, FL 33801	_
GENERA	BRADLEY G SMITH	832 SOUTH FLORIDA AVE LAKELAND, FL 33801	_ ■ Add □ Remove
GENERA	JENNIFER LLOREN	832 SOUTH FLORIDA AVE LAKELAND, FL 33801	_
GENERA	BEVERLY S FEDDELER	832 SOUTH FLORIDA AVE LAKELAND, FL 33801	_
			_ □ 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,	, enter change(s) here: (Attach additional sheets, if necessary.)
State.) Note: If the date inserted in this block does not me	days after the date this document is filed by the Florida Department of et the applicable statutory filing requirements, this date will not
be listed as the document's effective date on the Do	spartment of State's records,
Signature(s) of a general partition or all s	general partners*:
removing a "limited liability limited partnership" e when adding or removing a "limited liability limite	nired to sign this document unless the limited partnership is adding or election statement. Chapter 620, F.S., requires all general partners to sign apartnership" election statement.)
Finda C. Smle	Th
Signature(s) of all new or dissociating ge	eneral partner(s), if any:
1 8/0.	
John en	
Dhia	
Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	