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COVER LETTER

TO:

TO: Registration Division of C					
	long West	Decorder 1	1		
SUBJECT:	me of Eldrida Limited Par	tnership or Limited Liability	v Limited Partnership		
110	inic of Figurea Emiliea Fai	mersing or tanined Editionic	y Enned I dichership		
The enclosed Certifi	cate of Amendment a	nd fee(s) are submitted	for filing.		
Please return all corr	respondence concernit	ng this matter to:			
Att: Roana	Lobiondo Contact Person				
FEIN Com-	NEXCIAL TOP	extier LP	:: 22		
120 S. Ux	IVEVITY DV	ive, Crite B	EIG JE		
Plantation	n, FL 333	325	Jan 16		
Roana 44	City, State and Zip Code O Bellouth be used for future annual		A 1: 29		
For further informat	ion concerning this ma	atter, please call:			
Rowin L Name of Conta	ablonds act Person		23-9749 time Telephone Number		
Enclosed is a check	for the following amo	unt:			
S52.50 Filing Fee	☐\$61.25 Filing Fee and Certificate of Status	☐\$105.00 Filing Fee and Certified Copy	☐S113.75 Filing Fee, Certified Copy, and Certificate of Status		
STREET ADDRES	SS:	MAILING A	ADDRESS:		
Registration Section		Registration	• •		
_	Division of Corporations Division of Corporations				
Clifton Building		P. O. Box 63	•		
2661 Executive Cen	ter Circle	Tallahassee,			
Tallahassee, FL 323	_				
	· -				

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

Colony	West	Associates	LTD.	
		currently on file with Florida		

Pursuant to the provisions of section 620.1202, I limited liability limited partnership, whose certificate of amendment to	ficate was filed wit orida document nu	th the Florida Department of State on imber A 98 00000 252,
This amendment is submitted to amend the following	:	
A. If amending name, enter the new name of the here:	limited partnershi	o or limited liability limited partnership
New name must be distinguis	shable and contain an	acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Partnership suffixes. Acceptable Limited Liability Limited Partnership suffixes. B. If amending mailing address and/or prince.	: Limited Liability Lim	ited Partnership; L.L.L.R. or LLLP.
principal office address here:	apai office addres	s, enter new maning address and/or
New Principal Office Address: (Must be STREET address)		
New Mailing Address: (May be post office box)		20
C. If amending the registered agent and/or registered agent and/or the new registered off		s on our records, <u>enter the name of th</u>
Name of New Registered Agent:		
New Registered Office Address:	Enter Flo	orida street address
		, Florida
	City	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	e name ai	<u>nd business</u>	address_o	<u>f_each</u>	general	<u>partner</u>	being
ado	led or removed from our records:								

<u>Title</u>	Name	Address	Type of Action
	BtM Holdings Luc-	120 South University Prontation Fun	174 D Add Remove
			Add Remove
	Fein Commercial Propert		— Carda
		120 South University PLANTATION FL	0(180 Remove
			Add Remove
			Adu Remove
			□ Add □ Remove

E. If the limited partnership or limited liability limited partnership is amending its "limited liabilitimited 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 amendmen

			<u>.</u>		
Effective date, if other than the da (Effective date cannot be prior to nor mo State.)	te of filing: ore than 90 da	ys after the de	ate this document is	s filed by the Florida	i Department o
Note: If the date inserted in this block do				uirements, this date	will not
be listed as the document's effective date	on the Depar	riment of Stat	e's records.		
Signature(s) of a general partne	r or all gen	eral partn	ers*:		
(*NOTE: Only one current general part removing a "limited liability limited part when adding or removing a "limited liab	narchin' alout	ion statemant	Chapter 620 E.S.		
when adding or removing a "limited liab Fein Commercial PRO PER: Market	perties	LY		:: ~ 2	
Pet Mfins	27			119	
				3. 2)
					
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					;
Signature(s) of all new or dissoc	<u>iating gene</u>	ral partne	r(s), if any:	**************************************	
			 		
				·	
Filters France	\$53 EA				
Filing Fee: Certified Copy (optional):	\$52.50 \$52.50				
Certificate of Status (optional):	\$8.75				