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COVER LETTER

TO:		on Section of Corporations		
SHRI	ECT:	BERWEIN PARKS PARTNI	ERSHIP, LLLP	
эов	Le1	Name of Florida Limited Par	tnership or Limited L	iability Limited Partnership
The er	nclosed Cer	tificate of Amendment ar	nd fee(s) are subm	itted for filing.
Please	return all c	correspondence concernir	ng this matter to:	
Wailac	e Eberwein			
		Contact Person		
Eberwe	ein Parks Part	nership		
		Firm/Company		
P.O. B	ox 635			
	•	Address	-	
Cape C	Canaveral, FL	32920		
•		City, State and Zip Code		
Eberw	veinW@aol.co	oni		
Е	-mail address	(to be used for future annual	report notification)	
For fu	irther inform	nation concerning this ma	atter, please call:	
Wallac	ce Eberwein		at (432-4754
	Name of Co	ontact Person	Area Code an	d Daytime Telephone Number
Enclo	sed is a che	ck for the following amo	unt:	
\$ \$52	1.50 Filing Fee	: ☐\$61.25 Filing Fee and Certificate of Status	□\$105,00 Filing and Certified Cop	
Regis Divisi P.O. I	ng Address tration Section of Corp Box 6327 massee, FL 3	ion orations	Registra Division The Cer 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

CEDTIFICAT	TE OF AMENDMENT	
CERTIFICA	TO	To the state of th
CERTIFICATE OF	LIMITED PARTNERS	HIP HE
	OF	
EBERWEIN PARKS PARTNERSHIP, LLLP		
Insert name currently on	file with Florida Department of	HIP The State
Pursuant to the provisions of section 620.1202, limited liability limited partnership, whose certi Apr 17, 1998, assigned F		lorida Department of
adopts the following certificate of amendment t	o its certificate of limited p	partnership.
This amendment is submitted to amend the following	t.	
A. If amending name, <u>enter the new name of the here</u> :	limited partnership or lim	ited liability limited p
New name must be distingui	shable and contain an acceptab	le suffix.
Acceptable Limited Partnership suffixes: Limited Partner Acceptable Limited Liability Limited Partnership suffixes	rship, Limited, L.P., LP, or Ltd. :: Limited Liability Limited Pari	tnership, L.L.L.P. or LLL
B. If amending mailing address and/or princ		
principal office address here:	cipai office address, enter	new manning addit
New Principal Office Address: (Must be STREET address)		
(Must be STREET duaress)		
New Mailing Address: (May be post office box)	·	
(way be post office that)		
C. If amending the registered agent and/or registor	ered office address on our ro	ecords, enter the name
registered agent and/or the new registered office a		,
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida str	eet 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.

<u>Title</u>	Name	Address	Type of Actio
	Eberwein, Virginia D, Trustee	2960 N. Tropical Tr. Merritt Island, Fl. 32953	□ Add ■ Remov
			
			🗖 Remov
			D Add

Effective date, if other than the date of filing (Effective date cannot be prior to nor more than 90 a	g:
State.)	t the applicable statutory filing requirements, this date will not
be listed as the document's effective date on the Dep	partment of State's records.
Signature(s) of a general partner or all ge	eneral nartners*
	
removing a "limited liability limited partnership" ele- when adding or removing a "limited liability limited	red to sign this document unless the limited partnership is adding or ection statement. Chapter 620, F.S., requires all general partners to sign partnership "election statement.)
1.11 -2 -	
Wallace Elevin, Partner/tyont	
- I mer/Agent	
Signature(s) of all new or dissociating gen	neral partner(s), if any:
Filing Fee: \$52.50	\rightarrow
Certified Copy (optional): \$52.50	
Certificate of Status (optional): \$8.75	