

B000000000/46

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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**EXAMINER**

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2011 FEB 23 AM 10:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: THE STRIANESE FAMILY LIMITED PARTNERSHIP  
Name of Foreign Limited Partnership or Limited Liability Limited Partnership

The enclosed amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

BERNARD STRIANESE  
Contact Person

THE STRIANESE FAMILY LIMITED PARTNERSHIP  
Firm/Company

10 SEAVIEW BVD  
Address

PORT WASHINGTON, NY 11050  
City, State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CATHY MINERO at (516) 484-7220  
Name of Contact Person Area Code and Daytime 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

STREET ADDRESS:

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

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2011 FEB 23 AM 10:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AMENDMENT TO CERTIFICATE OF AUTHORITY  
FOR  
FOREIGN LIMITED PARTNERSHIP OR  
LIMITED LIABILITY LIMITED PARTNERSHIP

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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1. The name of the limited partnership or limited liability limited partnership as appears on the records of the Florida Department of State is:  
THE STRIANESE FAMILY LIMITED PARTNERSHIP
2. The jurisdiction of its formation is: NEW YORK STATE
3. The date the entity was authorized to transact business in Florida is: MAY 9, 2000
4. If the amendment changes the name of the limited partnership or limited liability limited partnership, enter the new name:  
\_\_\_\_\_

Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.

Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.

5. If the amendment changes the general partner(s), list the name and business address of each general partner:

Name:

Business Address:

BERNARD STRIANESE

10 SEAVIEW BLVD  
PORT WASHINGTON, NY 11050

CARMELLA STRIANESE

10 SEAVIEW BLVD  
PORT WASHINGTON, NY 11050

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

6. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

7. If the amendment corrects any false statement listed in the application, indicate the statement being corrected and the correction:

REMOVE BERNADETTE STRIANESE AND RITA CUSIMANO  
AS GENERAL PARTNERS IN ACCORDANCE WITH THE  
AMERICAN ARBITRATION ASSOCIATION DECISION COPY  
OF WHICH IS ENCLOSED

8. If the amendment is to add or delete an election to be a limited liability limited partnership statement, check the appropriate box:

☐

The entity elects to be a limited liability limited partnership.

☐

The entity is no longer a limited liability limited partnership.

9. Attached is an original certificate, no more than 90 days olds, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

10. Effective date, if other than the date of filing: \_\_\_\_\_  
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

Signature of a general partner:

Bernard V. Strianese

Typed or printed name:

BERNARD V. STRIANESE

Filing Fee:	\$52.50
Certified Copy (optional):	\$52.50
Certificate of Status (optional):	\$8.75

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TALLAHASSEE, FLORIDA

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