(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

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JUN 1 2 2019

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Peak Life (Name of Foreign Limited I	Parthership or Limited Liability Limited Partnership
The enclosed amendment and fee(s) are st	bmitted for filing.
Please return all correspondence concerni	ng this matter to:
Anthony Marc Oha	40 V
Peak Life Capital L	
LIG Key Haven Roc	
Ney West, FL Z	53040
Peak life (apital @gmail address: (to be used for future annual	11/0M
For further information concerning this m	atter, please call:
Name of Contact Person	at (305) 504-2886 Area Code Daytime Telephone Number
Enclosed is a check for the following amo	unt:
S52.50 Filing Fee S61.25 Filing Fee and Certificate of Status	\$105,00 Filing Fee and Certified Copy Certified Copy, and Certificate of Status
STREET ADDRESS: Registration Section Division of Corporations Clifton Building	MAHLING ADDRESS: Registration Section Division of Corporations P. O. Box 6327
2661 Executive Center Circle	Tallahassee, FL 32314

Tallahassee, FL 32301

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

1. The name of the limited partnership or limited	tiability limited partnership as it appears on the records of
the Florida Department of State is: Peak L	ife (apital LP
2. Document Number of Foreign Limited Partners	ship or Limited Liability Limited Partnership:
2. The jurisdiction of its formation is: Del C	woll = = = = = = = = = = = = = = = = = =
3. The date the entity was authorized to transact b	pusiness in Florida is: May 1,2019
	iled partnership or limited liability limited partnership, enter
Acceptable Limited Partnership suffixes: Limited Acceptable Limited Liability Limited Partnership LLLP.	Partnership, Limited, L.P., LP, or Ltd. 2 suffixes: Limited Liability Limited Partnership, L.L.L.P. or
5. If the amendment changes the general partner(Name:	s), list the name and business address of each general partner: Business Address:
Anthony Ohayon	46 Key Haven Road Add Key West, FL 33040 Remove
Ohayon Enterprises Inc.	Hey West, TL 33040 Change Ho Key Huven Road Add Key West, FL 33040 Change
	Add ☐Remove ☐Change
	☐Add ☐Remove ☐Change
	Add ☐Remove ☐Change
	Add □Remove □Change

6. If the amendment changes the jurisdiction of organization, in	ndicate new jurisdiction:
7. If the amendment corrects any false statement listed in the a corrected and the correction:	pplication, indicate the statement being
8. If the amendment is to add or delete an election to be a limit the appropriate box:	ed liability limited partnership statement, check
The entity elects to be a limited liability limite	d partnership.
The entity is no longer a limited liability limite	ed partnership.
9. Attached is an original certificate, no more than 90 days olds amendment(s), duly authenticated by the official having custod which this entity is organized.	
10. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cann days after filing.)	(optional) ot be prior to date of filing or more than 90
Note: If the date inserted in this block does not meet the applicable be listed as the document's effective date on the Department of Sta	
Signature of a general partner: Harlway Chyar	201
Typed or printed name:	
Anthony Ohayon	APPA FIL 2019 JUN 12
Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	AHII: 02

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "PEAK LIFE CAPITAL LP" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS

OF THE TENTH DAY OF JUNE, A.D. 2019.

2019 JUN 12 AM II: 02



Authentication: 202990889

Date: 06-10-19

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