

2/7/2021

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000052456 3)))



H210000524563ABCZ

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : CAPITAL LEGAL GROUP PA  
Account Number : I20210000025  
Phone : (305)676-0924  
Fax Number : (305)676-0924

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: lshapiro@clglaws.com

FEB 11 2021

Mr. SOLOMON

**LP/LLLP  
AMENDMENT/RESTATEMENT/CORRECTION  
ALPHAVIX HEDGE FUND, LP**

Certificate of Status	0
Certified Copy	0
Page Count	01

2/7/2021

Division of Corporations

Estimated Charge	\$52.50
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2021 FEB 10 AM 10:56

CLERK OF STATE  
TALLAHASSEE, FLORIDA

H21000052456 3

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Alphavix Hedge Fund, LP  
Name of Foreign Limited Partnership or Limited Liability Limited Partnership

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

Please return all correspondence concerning this matter to:

Juan Carlos Penaloza  
Contact Person

Perihelion General Partners, LLC  
Firm/Company

801 Brickell Avenue, Suite 1620  
Address

Miami, FL 33131  
City, State and Zip Code

lshapiro@clglaws.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lauren Shapiro at (305) 676-0924  
Name of Contact Person Area Code 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

**Mailing Address:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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CLERK OF COURT  
TALLAHASSEE, FL 32303

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

1. The name of the limited partnership or limited liability limited partnership as it appears on the records of the Florida Department of State is:  
Alphavix Hedge Fund, LP

2. Document Number of Foreign Limited Partnership or Limited Liability Limited Partnership: B20030000207

2. The jurisdiction of its formation is: Delaware

3. The date the entity was authorized to transact business in Florida is: October 28, 2020

4. If the amendment changes the name of the limited partnership or limited liability limited partnership, enter the new name:  
OPTRON Capital Hedge Fund, LP

*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.*

(If name unavailable in Florida, enter alternate name adopted for the purpose of transacting business in Florida.)

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

<u></u>	<u></u>	<input type="checkbox"/> Add
<u></u>	<u></u>	<input type="checkbox"/> Remove
<u></u>	<u></u>	<input type="checkbox"/> Change
<u></u>	<u></u>	<input type="checkbox"/> Add
<u></u>	<u></u>	<input type="checkbox"/> Remove
<u></u>	<u></u>	<input type="checkbox"/> Change
<u></u>	<u></u>	<input type="checkbox"/> Add
<u></u>	<u></u>	<input type="checkbox"/> Remove
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<u></u>	<u></u>	<input type="checkbox"/> Add
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<u></u>	<u></u>	<input type="checkbox"/> Change
<u></u>	<u></u>	<input type="checkbox"/> Add
<u></u>	<u></u>	<input type="checkbox"/> Remove
<u></u>	<u></u>	<input type="checkbox"/> Change

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CLERK OF THE  
FLORIDA DEPARTMENT OF  
STATE

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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:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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.

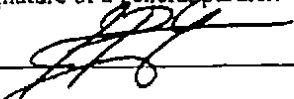
☐ The entity is no longer a limited liability limited partnership.

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: \_\_\_\_\_ (optional)  
*(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.)*

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Signature of a general partner:



Typed or printed name:

Juan Carlos Penaloza

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

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JAN 29 2021 10:00 AM

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