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(Requestor's Name)				
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(Cil	ty/State/Zip/Phone	9 #)		
PICK-UP	WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
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		<u> </u>		
(D0	cument Number)			
Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer:			
Special Instructions to Filing Officer:				

Office Use Only



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06 DEC 18 PM 12: 3

COVER LETTER

TO: Registration Division of	Section Corporations			
SUBJECT: HERREN FAMILY LIMITED PARTNERSHIP, LTD.				
(Name of	Florida Limited Partnersh	ip or Limited Liability Lin	nited Partnership)	
The enclosed Certif	icate of Amendment a	nd fee(s) are submittee	l for filing.	
Please return all cor	respondence concerni	ng this matter to:		
GEORGE D. MENDEN				
	(Contact Person)			
MENDEN, FREIMAN				
	(Firm/Company)			
2 RAVINIA DRIVE, SI			••	
	(Address)			
ATLANTA, GEORGL	A 30346			
	(City, State and Zip Code)			
For further information concerning this matter, please call:				
STEVE PROVOST		at (770) 37	9-1450	
(Name of Con	tact Person)		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:		MAILING ADDRESS:		
Registration Section		Registration Section		
Division of Corporations		Division of Corporations P. O. Box 6327		
Clifton Building 2661 Executive Center Circle		Tallahassee, FL 32314		
Tallahassee, FL 32			,	

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

FILED 06 DEC 18 PM 12: 39

CERTIFICAT		PARINERSHIP	, , , , , , , , , , , , ,
	OF		SEChelenie Lare
			SECHETART OF STATE TALLAHASSEE, FLORIDA
	MILY LIMITED PAR		
(Insert name curren	tly on file with Florid	da Department of State	•)
Pursuant to the provisions of section partnership or limited liability limit. Florida Department of State on certificate of amendment to its cert	ted partnership, w July 23, 1999	hose certificate wa	s filed with the
FIRST: Amendment(s): (Indicate	limit	ed	•
The Partnership hereby elects to become	a Limited Liability P	artnership authorized to	o do business in the
State of Florida.			
Win	. ,		
The name of the Partnersh	lp ls:		
"Herren Family Li	mited Partners	ship, LLLP".	
SECOND: Effective date, if other (Effective date cannot be prior to nor mor Department of State.)		-	is filed by the Florida
Signature(s) of a general partner(s) (*Note: If adding or deleting an election partners must sign the amendment.)	*: to be a limited liabili 	ity limited partnership :	statement, all general
Signature(s) of <u>new</u> or <u>dissociating</u>	g general partner(s), if any:	
Filing Fee: Certified Copy (optional):	\$52.50 \$52.50		

\$8.75

Certificate of Status (optional):