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.

(((H10000258298 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Division of Corporations

Fax Number : (850)617-6383

Account Name : CORPORATE ACCESS, INC.

Account Number : FCA00000011 Fhone : (850) 222-2666 Fax Number : (850)222-1666

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

RWSTT	Address:			

LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION WILLIAM R. AND THELMA L. CLONTS FAMILY LIMITED **PARTN**

Certificate of Status	0	
Certified Copy	1	
Page Count	03	
Estimated Charge	\$105.00	

B. BOSTICK

Electronic Filing Menu

Corporate Filing Menu

Help

DEC 2 2010

EXAMINER

HJ00002582983

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF OF OF

William R. and Thelma L. Clonts Limited Partnership

Insert name currently on file with Florida Department of State

Pursuant to the provisions of section 620.1202, Florida Statutes, this Florida limited partnership or limited liability limited partnership, whose certificate was filed with the Florida Department of State on December 30, 1994, assigned Florida document number A9400001880, adopts the following certificate of amendment to its certificate of limited partnership. This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited partnership or limited liability limited partnership here:		
New name must be disti	inguishable and contain an acceptable suffix,	_
Acceptable Limited Partnership suffixes: Limited Partnership suffixes: Limited Partnership suffixed	rtnership, Limited, L.P., LP, or Ltd. ffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.	
B. If amending mailing address and/or portacipal office address here:	orincipal office address, <u>enter new mailing address and</u>	₫/or
New Principal Office Address (Must be STREET address)	3.	
New Mailing Address: (May be post office box)		
new registered agent and/or the new registered	registered office address on our records, enter the name of Office address here:	f the
Name of Now Registered Agent:		T S
New Registered Office Address:	Rnter Florida street address Florida City Zip Code OR III	

Page 1 of 3

H100002582983

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.

If Changing Registered Agent, Signature of New Registered Agent

D,	If amending the genoral partner(s), <u>enter the name and business address of each general partner bein</u>
<u>nd</u>	ed or removed from our records:

<u>Title</u>	<u>Name</u>	Address	Type of Action		
<u>GP</u>	Clonts ERT 11/26/94	1001 Geneva Drive Oviedo, FL 32765	Add ☑ Remove		
GP	W Rex Clonts Jr	6265 Lake Charm Circle Oviedo, Fl. 32765	☑Add □Remove		
<u>GP</u>	Charles Lee Clonts	1249 Apache Drive Geneva, FL 32732	Add Remove		
<u>GP</u>	Janet C. Neel	61 Aubrey Road NE White, GA 30184	✓ Add □ Remove		
<u>GP</u>	Susan C. West	4049 Heirloom Road Plac Oviedo, FL 32766	e Add Remove		
<u>GP</u>	Vivian Clonts	146 Hillcrest Drive Oviedo, FL 32765	_		
E. If the limited partnership or limited liability limited partnership is amending its "limited liability limited partnership" status, enter change here:					
This Limited Partnership hereby elects to be a "Limited Liability Limited Partnership."					
This Limited Partnership bereby removes its "Limited Liability Limited Partnership" status.					
(NOTE: If adding or removing" limited liability limited partnership" status, all general partners must signify amendment.					

Page 2 of 3

H10000258298 3

F. If amending any other information, enter chi	ange(s) here: (Attach additional sheets, if necessary.)
Effective date, if other than the date of filing:	r the date this document is filed by the Florida Dapartment of
Signature(s) of a general partner or all general p	
*NOTE: Only one current general partner is required to sig emoving a "limited liability limited partnership" election state when adding or removing a "limited liability limited partnersh	cment. Chapter 620, F.S., requires all general partners to sign
M. of Cling.	
1. Rexclonts, Jr., Trust a.e.	
f the clonts Estate	
Coduction Trust dtd 11/201	94
VOSIONING GINDVAL POWYN Ignature(s) of all new or dissociating general pa	irtner(s), if any:
M. H. Stirt	Vin Chilo
John the Oth	Cant C. Mul
Sason Cwest	0
	10 SE
00 . V	AHASA AHASA
iling Fee: \$52.50 ertifled Copy (optional): \$52.50	SEI
ertificate of Status (optional): \$8.75	
	AM 10: 36 FESTATE

Page 3 of 3