# I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered. 01/24/2020

SIGNATURE: M. RONALD LIPMAN

# Entity Name: LIPMAN FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP **Current Principal Place of Business:**

1605 MIDDLE GULF DRIVE #321 SANIBEL. FL 33957

DOCUMENT# A1500000743

# **Current Mailing Address:**

1605 MIDDLE GULF DRIVE #321 SANIBEL, FL 33957 US

### FEI Number: 52-1557839

#### Name and Address of Current Registered Agent:

LIPMAN, M. RONALD 1605 MIDDLE GULF DRIVE #321 SANIBEL, FL 33957 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

#### SIGNATURE:

Electronic Signature of Registered Agent

# **General Partner Detail :**

Document # Name LIPMAN, M. RONALD Address 1605 MIDDLE GULF DRIVE #321 City-State-Zip: SANIBEL FL 33957

# Certificate of Status Desired: No

Date

GENERAL PARTNER

FILED Jan 24, 2020 Secretary of State 5707575980CC

Electronic Signature of Signing General Partner Detail