## **2017 FLORIDA LIMITED PARTNERSHIP REINSTATEMENT**

DOCUMENT# A96000001443

Entity Name: JAMES BROWN FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:** 

**!5 BLUEWATER POINT DRIVE** NICEVILLE. FL 32578

## **Current Mailing Address:**

**!5 BLUEWATER POINT DRIVE** NICEVILLE. FL 32578 US

FEI Number: 59-3389189 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

BROWN, JAMES J **!5 BLUEWATER POINT DRIVE** NICEVILLE, FL 32578 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: JAMES J BROWN 09/07/2017

Electronic Signature of Registered Agent

Date

**FILED** Sep 07, 2017

**Secretary of State** 

CR8731706533

## **General Partner Detail:**

P96000049124 Document # Name SAFEL, INC. Address 111 SUN LANE

City-State-Zip: PANAMA CITY BEACH FL 32413

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.

SIGNATURE: JAMES J BROWN

Electronic Signature of Signing General Partner Detail

REGISTERED AGENT

09/07/2017

Date