

2018 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P16000081726

Entity Name: 1216 PARTNERSHIP, LLC

Current Principal Place of Business:

1600 CAPITAL CIRCLE SW
TALLAHASSEE, FL 32310

Current Mailing Address:

PO BOX 2497
TALLAHASSEE, FL 32316 24

FEI Number: 81-4072635

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCALISTER, LEE E
1600 CAPITAL CIRCLE SW
TALLAHASSEE, FL 32310 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

_____ Date

Officer/Director Detail :

Title MGR
Name MCALISTER, LEE E
Address 1600 CAPITAL CIRCLE SW
City-State-Zip: TALLAHASSEE FL 32310

Title MANAGER
Name MCALISTER, LYLE
Address PO BOX 2497
City-State-Zip: TALLAHASSEE FL 32316

Title MANAGER
Name MCALISTER, JORDON
Address PO BOX 2497
City-State-Zip: TALLAHASSEE FL 32316

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LEE MCALISTER

MANAGER

10/09/2018

Electronic Signature of Signing Officer/Director Detail

Date