

A000000000445

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

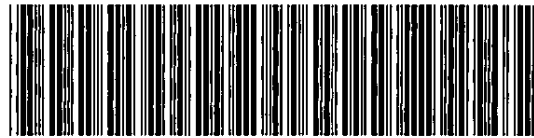
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 DEC -4 PM 3:20

T. Hampton DEC - 4 2007

COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT: D'Andrea Family Limited Partnership

(Name of Limited Partnership or Limited Liability Limited Partnership)

DOCUMENT NUMBER: A00000000445

The enclosed Statement of Change of Registered Office and/or Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

John D. Henry

(Contact Person)

National Partitions, Inc.

(Firm/Company)

10300 Goldenfern Lane

(Address)

Knoxville, TN 37931

(City, State and Zip Code)

For further information concerning this matter, please call:

John D. Henry

(Name of Contact Person)

at (888) 833-2595

(Area Code and Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Florida Department of State.

STREET ADDRESS:

Registration Section

Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section

Division of Corporations

P. O. Box 6327

Tallahassee, FL 32314

INHS04 (01/06)

**SACHER, ZELMAN, HARTMAN,
PAUL, BEILEY & ROLNICK, P.A.**

PROFESSIONAL ASSOCIATION
ATTORNEYS AT LAW
1401 BRICKELL AVENUE • SUITE 700
MIAMI, FLORIDA 33131-3503

TELEPHONE: (305) 371-8797
TELECOPIER: (305) 374-2605
EMAIL: info@sacherzelman.com
WEBSITE: www.sacherzelman.com

October 4, 2007

VIA DHL

Department of State-Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Re: D'Andrea

Dear Sir or Madam:

Attached herewith please find the following documents pertaining to the above-referenced matter for filing:

1. Cover Letter and Statement of Change of Registered Office and Registered Agent or Both for Corporation for D'Andrea Family Limited Partnership and a check in the amount of \$35.00 payable to Department of State.
2. Cover Letter and Statement of Change of Registered Office and Registered Agent or Both for Corporations for D'Andrea Holdings, Inc. and a check in the amount of \$35.00 payable to Department of State.

Please return a copy of the enclosed filed Amendments to my attention at your earliest convenience.

If you should have any questions, please do not hesitate to contact my office.

Yours very truly,


Marilyn Garcia-Varona,
Legal Assistant

/mgv
Enclosure



**SACHER, ZELMAN, HARTMAN,
PAUL, BEILEY & ROLNICK, P.A.**

PROFESSIONAL ASSOCIATION
ATTORNEYS AT LAW
1401 BRICKELL AVENUE • SUITE 700
MIAMI, FLORIDA 33131-3503

TELEPHONE: (305) 371-8797
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EMAIL: info@sacherzelman.com
WEBSITE: www.sacherzelman.com

October 19, 2007

Tammy Hampton
Regulatory Specialist II
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314


**RE: D'Andrea Family Limited Partnership
Document No. A00000000445**

Dear Ms. Hampton:

As per your correspondence dated October 8, 2007, enclosed please find an original and copy of Limited Partnership Statement of Change of Registered Agent/Office which we ask you file and return accordingly.

Thank you for your attention to this matter.

Yours very truly,


MARILYN GARCIA-VARONA
Paralegal



**SACHER, ZELMAN, HARTMAN,
PAUL, BEILEY & ROLNICK, P.A.**

PROFESSIONAL ASSOCIATION
ATTORNEYS AT LAW
1401 BRICKELL AVENUE • SUITE 700
MIAMI, FLORIDA 33131-3503

TELEPHONE : (305) 371-8797
TELECOPIER : (305) 374-2605
EMAIL : info@sacherzelman.com
WEBSITE : www.sacherzelman.com

November 27, 2007

FL Secretary of State
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

**RE: D'Andrea Family Limited Partnership
Document No. A000000004445**

Dear Ms. Hampton:

Enclosed please find an original and copy of Limited Partnership Statement of Change of Registered Agent/Office which we ask you file and return accordingly.

Thank you for your attention to this matter.

Yours very truly,


IRIS M. CASTILLO
Assistant

IMC/
Enclosures

John D. Henry
Chief Financial Officer
jhenry@n-p.com

10300 Goldenfern Lane
Knoxville, TN 37931
Ph: 888-833-2595 Fax: 888-833-2595

***** DOCUMENT TRANSMITTAL *****

To: FL Secretary of State
Amendment Section
Division of Corporations
P.O. Box 6237
Tallahassee, FL 32314

Date: November 15, 2007

Via: U.S. Regular Mail

Subject: D'Andrea Family Limited Partnership--A000000004445
Change of Registered Agent

Dear Sir or Madam:

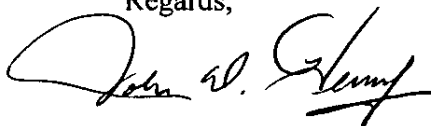
In accordance with your letter of October 23, 2007, please find attached our corrected Statement of Change of Registered Agent form for the above referenced entity.

We have already tendered our \$35.00 filing fee.

Please file this document and advise us of such actions.

Thank you in advance for your cooperation and should you have questions, or require further information, I can be reached at the number shown above.

Regards,





FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

07 OCT 22 PM 1:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

October 8, 2007

ANTHONY D'ANDREA
D'ANDREA FAMILY LIMITED PARTNERSHIP
10300 GOLDFERN LN
KNOXVILLE, TN 37931

SUBJECT: D'ANDREA FAMILY LIMITED PARTNERSHIP
Ref. Number: A00000000445

We have received your document for D'ANDREA FAMILY LIMITED PARTNERSHIP and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Corporation, but your entity is a Limited Partnership. Please complete and return the enclosed blank form(s).

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 907A00058841



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 23, 2007

JOHN D HENRY
NATIONAL PARTITIONS, INC
10300 GOLDENFERN LN
KNOXVILLE, TN 37931

SUBJECT: D'ANDREA FAMILY LIMITED PARTNERSHIP
Ref. Number: A00000000445

RECEIVED
07 DEC -4 PM 2:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for D'ANDREA FAMILY LIMITED PARTNERSHIP and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please list the correct name of the new registered agent as it is listed on our database.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 007A00062248

**LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP
STATEMENT OF CHANGE OF REGISTERED OFFICE OR
REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. D'Andrea Family Limited Partnership

Name of Limited Partnership or Limited Liability Limited Partnership

2. 3/10/2000

Date of filing/registration in Florida

3. A000000004445

Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Anthony F. D'Andrea

Name

340 W. 78th Road

Address

Hialeah, FL 33014

City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

Sacher, Zelman, Hartman, Paul, Bailey & Rolnick, P.A.

Name

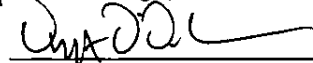
1401 Brickell Ave., Ste. 700

Florida street address (P.O. Box not acceptable)

Hialeah, FL 33131

City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.



Signature of General Partner

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 an accept the obligations of my position as registered agent.



Signature of Registered Agent

Director Sacher Zelman Hartman et al.

Filing Fee: \$35.00

Certified Copy (optional): \$52.50

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 DEC -4 PM 3:21