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Nils E. Sundquist — 258 Silverado Drive Naples FL 34119			
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	(Ci	ty/State/Zip/Phone	·#)
	PICK-UP	WAIT	MAIL
	(Bu	isiness Entity Nam	ie)
	(Do	cument Number)	
Certifi	ed Copies	_ Certificates	of Status
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Spec	cial Instructions to	Filing Officer:	
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Office Use Only



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February 23, 2005

NILS E. SUNDQUIST 258 SILVERADO DR NAPLES, FL 34119

SUBJECT: NILS E. SUNDQUIST FAMILY LIMITED PARTNERSHIP

Ref. Number: A0000000757

We have received your document for NILS E. SUNDQUIST FAMILY LIMITED PARTNERSHIP and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return 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) 245-6025.

Trevor Brumbley Document Specialist

Letter Number: 005A00012809

05 MAR -7 PM 1:4



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

February 3, 2005

NILS E. SUNDQUIST 258 SILVERADO DR NAPLES, FL 34119

SUBJECT: NILS E. SUNDQUIST FAMILY LIMITED PARTNERSHIP

Ref. Number: A0000000757

We have received your document for NILS E. SUNDQUIST FAMILY LIMITED PARTNERSHIP and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you sumbitted is to amend a general partnership. Please complete the enclosed form to amend a limited partnership. The fee to file the amendment is \$52.50.

There is a balance due of \$27.50.

Please return 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) 245-6025.

Trevor Brumbley Document Specialist

Letter Number: 705A00007808

5 MAR -7 PM 1:1

TRANSMITTAL LETTER

SUBJECT: NILS E. SUNDQUIST FAMILY LIMITED PARTNERSH
(Name of Limited Partnership)

TO:

Registration Section Division of Corporations

DOCUME	ENT NUMBER: 7 0000000	<u></u>
The enclos	sed Certificate of Amendment and fee(s) are submit	nted for filing.
Please retu	urn all correspondence concerning this matter to the	e following:
	NILS E. SUNDQUE (Firm/Co) Z58 SILUE (Addr	SUNDQUIST Person) UIST FAMILY LIMITED PARTN mpany) ELADO DRIVE ress) FL 34119 d Zip Code)
For further	er information concerning this matter, please call:	730 753 1917
_	(Name of Person)	at (Z39) 353 - 196 Z (Area Code & Daytime Telephone Number)
Enclosed is	is a check for the following amount:	
\$52.50 \$52.50 \$6 \$6 \$7 \$7 \$7 \$7 \$4	_	\$105.00 Filing Fee & S113.75 Filing Fee, Certified Copy (additional copy is enclosed) MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

NILS E. DUNDQUIST FAMILY LIMITED PARTNERSHIF
(Insert name currently on file with Florida Dept. of State)
Pursuant to the provisions of section 620.109, Florida Statutes, this Florida limited partnership, whose certificate was filed with the Florida Dept. of State on
FIRST: Amendment(s): (indicate article number(s) being amended, added, or deleted)
FEI NUMBER CHANGE.
FROM: 41-6406999
To: 59-364-3906
(WAS ORIGINALLY FILED IN ERROR)
SECOND: This certificate of amendment shall be effective at the time of its filing with the Florida Department of State.
THIRD: Signature(s) Signature of current general partner:
Signature(s) of new general partner(s), if applicable:
FILED SEVAR-7 PM ALLAHASSE, E