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(Requestor's Name)				
A)	Address)			
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(C	City/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
	Business Entity Nan	ne)		
(Document Number)				
Certified Copies	Certificates	of Status		
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B. KOHR

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EXAMINER



COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Gatling Gun Enterprises, LLLP		
Name of Florida Limited F	Partnership or Limited Liability Limited Partnership	
The enclosed Certificate of Amendment	and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to:		
Anthony J Sellari, E	Α	
Contact Person		
Divine Blalock Martin & Sel	lari, LLC	
Firm/Company		
420 Columbia Drive Ste) 110	
Address		
West Palm Beach, FL. 3	33409	
City, State and Zip Code		
asellari@dbmscpa.co		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Anthony J Sellari	at (561) 686-1110	
Name of Contact Person	Area Code and Daytime Telephone Number	
Enclosed is a check for the following amount:		
\$52.50 Filing Fee and Certificate of Status	\$105.00 Filing Fee and Certified Copy Certified Copy, and Certificate of Status	
STREET ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations Clifton Building	Division of Corporations P. O. Box 6327	
2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301		

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP **OF**

Gatling Gun Enterprises, LLLP Insert name currently on file with Florida Department of State

Pursuant to the provisions of section 620.1202, Florida Statutes, this Florida limited partnership or limited liability limited partnership, whose certificate was filed with the Florida Department of State on, assigned Florida document number A00000001143,						
adopts the following certificate of amendment to its certificate of limited partnership.						
This amendment is submitted to amend the following:						
A. If amending name, enter the new name here:	of the limited partnership or	imited liability limited partnership				
New name must be di	stinguishable and contain an accep	table suffix.				
Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.						
B. If amending mailing address and/or principal office address, enter new mailing address and/or principal office address here:						
New Principal Office Addre (Must be STREET address)						
New Mailing Address: (May be post office box)						
C. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:						
Name of New Registered Agent:	Harry Hersey, III					
New Registered Office Address:	tered Office Address: 420 Columbia Drive Ste 110 Enter Florida street address					
	West Palm Beach	_, Florida <u>33409</u>				

New Registered Agent's Signature, if changing Registered Agent:

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 and accept the obligations of my position as registered agent.

> (See General Partner signature.) If Changing Registered Agent, Signature of New Registered Agent

D. If amending the general partner(s), enter the name and business address of each general partner being added or removed from our records:

	<u>Title</u>	Name	<u>Address</u>	Type of Action
ı	<u>GP</u>	Harry W Hersey, Jr	420 Columbia Drive #110 West Palm Beach, FL 33409	_ Add _ ✓ Remove
	<u>GP</u>	Harry Hersey.III, Trustee	420 Columbia Drive #110 West Palm Beach, FL 33409	Add Remove
				_ Add _ Remove
·		·		Add Remove
				_ Add _ Remove
				Add Remove
		artnership or limited liability " status, enter change here:	limited partnership is amend	ding its "limited liability
	This Limited	Partnership hereby elects to be	a "Limited Liability Limited Pa	rtnership."
	This Limited	Partnership hereby removes its	"Limited Liability Limited Part	tnership" status.
<u>(NO1</u>	E: If adding or i	removing" limited liability limited pa	artnership" status, all general partne	ers must sign this amendment.)

F. If amending any other information, enter c	hange(s) here: (Attach additional sheets, if necessary.)
,	
Effective data if other than the data of Clinar	
Effective date, if other than the date of filing: (Effective date cannot be prior to nor more than 90 days aft State.)	er the date this document is filed by the Florida Department of
,	
Signature(s) of a general partner or all general	partners*:
(*NOTE: Only one current general partner is required to si	gn this document unless the limited partnership is adding or atement. Chapter 620, F.S., requires all general partners to sig
	sinp election statement.)
Signature(s) of all new or dissociating general p	nartner(s) if any
O O O O O O O O O O O O O O O O O O O	artheres, if any.
	>
	-
	
Filing Fee: \$52.50	
Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	