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SECRETARY OF STATE

AUG - 6 2013 J. BRYAN

COVER LETTER

SUBJECT: The Best Family Limited Partnership
Name of Florida Limited 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:
Harold L. Harkins, Jr.
Contact Person
Harkins & Associates
Firm/Company
3450 Buschwood Park Drive, Suite 112 产资 基 一有
Address
Firm/Company 3450 Buschwood Park Drive, Suite 112 Address Tampa FL 33618 City, State and Zip Code harold@harkinsoffice.com E-mail address: (to be used for future annual report notification)
City, State and Zip Code
harold@harkinsoffice.com المعادية المع
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Harold L. Harkins, Jr. at (813) 933-7144
Name of Contact Person Area Code and Daytime Telephone Number
Enclosed is a check for the following amount:
\$52.50 Filing Fee S61.25 Filing Fee and Certificate of Status \$105.00 Filing Fee Certified Copy, and Certificate of Status
STREET ADDRESS: MAILING ADDRESS:
Registration Section Registration Section
Division of Corporations Division of Corporations
Clifton Building P. O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314
Tallahassee, FL 32314 Tallahassee, FL 32314

Certificate of Amendment To The Certificate of Limited Partnership Of Best Family Limited Partnership

Pursant to the provision of 620.109, Florida Statutes, this Florida limited partnership, whose certificate was filed with the Florida Department of State on August 7, 2000, adopts the following certificate of amendment to its certificate of limited partnership:

Name

The name of the limited partnership is:

Best Family Limited Partnership

Office Address The limited partnership's office address is:

1880 N. Crystal Lake Dr., Unit 45

Lakeland FL 33801

Mailing Address The mailing address of the limited partnership is:

1880 N. Crystal Lake Dr., Unit 45

Lakeland FL 33801

Registered

Agent & Address The name and address of the registered agent for service of process is:

Mary L. Best

1880 N. Crystal Lake Dr., Unit 45

Lakeland FL 33801

General Partners

The name and business address of the General Partners are:

Mary L. Best

1880 N. Crystal Lake Dr., Unit 45

Lakeland FL 33801

Keristen Eldridge 51 William Drive Cartersville GA 30120

SECOND S Py Progida

Effecting

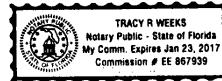
This Certificate of Amendment shall be effective at the time of its fling will Department of State.

IN WITNESS WHEREOF, the undersigned executed this Certificate of Limited Partnership this January 1, 2013.

STATE OF FLORIDA COUNTY OF POLK

Acknowledgement

The foregoing Certificate of Limited Partnership was acknowledged before me this _, 2013, by Mary L. Best, who is personally known to me.



STATE OF GEORGIA COUNTY OF_

The foregoing Certificate of Limited Partnership was acknowledged before me this _____, 2013, by Keristen Eldridge, who is personally known to me.

-State of Georgie

rotary Public, Bartow County, Georgia ∂y Commission Expires Oct. 25, 2014