

A01000000858
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Reply To: Sarasota

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August 15, 2002

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12037-1
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Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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-08/21/02--01038--001
*****35.00 *****35.00

Re: J & P Corcoran Family Partnership, LLLP

Dear Sir or Madam:

Enclosed please find an original and duplicate **Statement of Change** for the referenced Limited Liability Partnership, together with a check in the amount of \$35.00 to cover the filing of the Statement.

Please return a date-stamped copy of the Statement to the undersigned in the return envelope.

Very truly yours,

ABEL, BAND, RUSSELL, COLLIER,
PITCHFORD & GORDON, CHARTERED

Kenneth D. Doerr
Kenneth D. Doerr
For The Firm

BK

KDD:jmm

Enclosures

FILED
02 AUG 21 AM 10:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes, the undersigned limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. J & P Corcoran Family Partnership, LLLP
Name of the limited partnership

2. 06/28/2001 3. A01000000858
Date of filing/registration in Florida Document number assigned

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

John E. Napolitano

Name

100 Wallace Ave., Suite 240

Address

Sarasota, FL 34237

City, State and Zip

FILED
02 JUN 21 AM 10:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Kenneth D. Doerr

Name

240 S. Pineapple Ave., 10th Floor

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

Sarasota

FL

34236

City, State and Zip

6. Such change(s) was/were authorized by the general partners.
Family Management, LLC

Signature of General Partner By: Joseph C. Corcoran,
Managing Member

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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the limited partnership has been notified in writing of this change.

Kenneth D. Doerr
Signature of Registered Agent Kenneth D. Doerr

**Make checks payable to Florida Department of State and mail to:
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
Filing Fee: \$35.00**