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(Re	equestor's Name)	
(Ad	idress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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C. GOLDEN MAR 1 6 2020

COVER LETTER

TO: Registration Division of (Section Corporations		
SUBJECT: GEIGER	R VENTURES, LLLP		
N.	ame of Florida Limited Par	rtnership or Limited L	iability Limited Partnership
The enclosed Certif	icate of Amendment a	nd fee(s) are subm	nitted for filing.
Please return all cor	respondence concernii	ng this matter to:	
J. KNOX BURNS, IV			
	Contact Person		
CAUTHEN & BURNS	, P.A.		
	Firm/Company		
215 N. JOANNA AVE	NUE	<u> </u>	
	Address		
TAVARES, FL 32778			
	City, State and Zip Code		
geigvenag24@gma			
E-mail address: (to	be used for future annual	report notification)	
For further informat	ion concerning this ma	atter, please call:	
J. KNOX BURNS, IV		at ()343-2225
Name of Conta	act Person	Area Code an	d Daytime Telephone Number
Enclosed is a check	for the following amo	ount:	
\$52.50 Filing Fee	□\$61.25 Filing Fee and Certificate of Status	□\$105.00 Filing and Certified Cop	
Mailing Address: Registration Section Division of Corpora P.O. Box 6327 Tallahassee, FL 323	tions	Registra Divisio The Ce 2415 N	Address: ation Section n of Corporations ntre of Tallahassee . Monroe Street, Suite 810 ssee, FL 32303

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

2020 FTP 20 PH 12: 09

GEIGER VENTURES, LLLP						
Insert name cu	rrently on f	ile with Floric	la Departme	nt of State		
Pursuant to the provisions of section 62 limited liability limited partnership, wh August 13, 2001, as	iose certif signed Flo	ĭcate was fi orida docun	led with the	he Florida I ber <u>A010000</u>	Department of State	: on
adopts the following certificate of amer	idment to	its certifica	ite of limi	ted partner	ship.	
This amendment is submitted to amend the	following:					
A. If amending name, enter the new na	me of the	limited part	nership oz	· limited lia	bility limited partne	<u>rship</u>
N/A						
New name must b	e distinguis	hable and con	tain an acce	ptable suffix		
Acceptable Limited Partnership suffixes: Limit Acceptable Limited Liability Limited Partnersh					L.L.L.P. or LLLP.	
B. If amending mailing address and principal office address here:	or princi	ipal office :	iddress, <u>e</u>	<u>nter new i</u>	nailing address an	<u>d/or</u>
New Principal Office Ad (Must be STREET address)	dress:	<u>N/A</u>				
New Mailing Address: (May be post office box)		N/A				
C. If amending the registered agent and/ registered agent and/or the new registere	•••		dress on o	ur records,	enter the name of the	<u>: new</u>
Name of New Registered Agent:	N/A					
New Registered Office Address:	N/A	E.	.t.w Elouid	_ a street addr		
		E)	uer r tortat	i sireet aaar	CSS	
				, Florida		
		City			Zip Code	

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

added or removed from our records:

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.

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

<u>Title</u>	Name	Address	Type of Action
<u>GP</u>	Marilyn T. Geiger Trust UTA dated 4/26/99, as Amended	19070 Stangerone Rd. Belle Fourch, SD 57717	□ Add ■ Remove
GP	Amy C. Geiger	19070 Stangerone Rd. Belle Fourch, SD 57717	
			□ Add □ Remove

E. If the limited partnership or limited liability limited partnership is amending its "limited liability limited partnership" status, enter change here:

This Limited Partnership hereby elects to be a "Limited Liability Limited Partne	'artnersnii	itea Parthe	Limitea	Ciability i	ımıtea 1	' a '' I	101	elects	iereby	'shin	'ariner:	Limited I	This	
--	-------------	-------------	---------	-------------	----------	----------	-----	--------	--------	-------	----------	-----------	------	--

☐ This Limited Partnership hereby removes its "Limited Liability Limited Partnership" status.

(NOTE: If adding or removing" limited liability limited partnership" status, all general partners must sign this amendment.)

F. If amending any other information, enter cha	nge(s) here: (Attach additional sheets, if necessary.)
TVA	
Lifewick Land Control	
Effective date, if other than the date of filing: (Effective date cannot be prior to nor more than 90 days after	the date this document is filed by the Elevela Daniel
orace, j	
Note: If the date inserted in this block does not meet the applic be listed as the document's effective date on the Department of	able statutory filing requirements, this date will not f State's records.
Signature(s) of a general partner or all general partner	<u>artners*:</u>
ℓ^* NOTE: Only one current general partner is required to sign	this document unless the limited partnership is adding or
removing a "limited liability limited partnership" election state when adding or removing a "limited hability limited partnershi	ment. Chapter 620 F.S. requires all general controls to en-
,	
· ilwood c. Leign 2/10/2	
Elwood E. Geiger, Trustee of the	
Elwood E. Geiger Trust	
UTA dated 4/26/99, as amended	
Signature(s) of all new or dissociating general par	4(1)
Elwood E. Geiger & Amy C. Geiger	iner(s), if any:
Successor Co-Trustees of the	
Ma <u>rilyn T. Geiger Trust, UTA dated</u> 4/26/99, as amended	
8/ (8 6	1
Elwood E. Geiger, Successor Co-Trustee	łc
· /	Amy C. Leiger
Amy C. Reiger, Successor Co-Trustee	Amy C. Beiger
Filing Fee: \$52.50	
Certified Copy (optional): \$52.50	
Certificate of Status (optional): \$8.75	