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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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DIVISION OF CORPORATION

G. MCLEOD

MAY 1 6 2008

EXAMINER

COVER LETTER

SUBJECT: Ballard Family Limited Partnership

TO:

Registration Section Division of Corporations

(Nai	ne of Florida Limited Part	mership or Limited Liability	y Limited Partnership)
The enclosed Certific	cate of Amendment an	nd fee(s) are submitted	for filing.
Please return all corre	espondence concernin	g this matter to:	
Margaret	(Contact Person)	lard	
^ ~	(Firm/Company) Oly Drive (Address)		· ·
(0	Ch Carden City, State and Zip Code)		0
For further information	on concerning this ma	tter, please call:	
Margaret Dame of Conta	Ballard	_at (Sol) 81	kS·6722 aytime Telephone Number)
•	or the following amou	•	yume retephone rumbery
\$52.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fee and Certified Copy	\$113.75 Filing Fee, Certified Copy, and Certificate of Status
STREET ADDRESS Registration Section Division of Corporati Clifton Building 2661 Executive Center Tallahassee, FL 3230	ons er Circle	MAILING A Registration of C Division of C P. O. Box 63 Tallahassee,	Section Corporations 27

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF Baland Family Limited Partnership (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 Mou 12, 2008, 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 of the limited partnership or limited liability limited partnership here:

(New name must be distinguishable and contain an acceptable 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 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:

Margaret L.F. Ballard

New Registered Office Address:

(Enter Florida street address)

Palm Beach Gardens, Florida 3341

v) (

(Zin Code)

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.

f Changing Registered Agent, Signature of New Registered Agent)

<u>Title</u>	<u>Name</u>	Address	Type of Action
Mr	Jack Bala Deceased	Hogo Holly Dr Halm Bealch	CALCONS Remove
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ted partner	ship" status, enter chang d Partnership hereby elect	l liability limited partnership is e here: s to be a "Limited Liability Limite oves its "Limited Liability Limited	d Partnership."
		limited partnership" status, all general	
amending	any other information, ent	er change(s) here: (Attach addition	al sheets, if necessary.)

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Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75