

HO1000001671

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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EXAMINER

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** THE ERDMAN FAMILY LIMITED PARTNERSHIP I  
Name of Limited Partnership or Limited Liability Limited Partnership

**DOCUMENT NUMBER:** A01000001671

The enclosed Statement of Change of Registered Office and/or Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

D'ARCY ERDMAN

Contact Person

Firm/Company

27008 OAKWOOD LAKE DR

Address

BONITA SPRINGS, FL 34134

City, State and Zip Code

DAWN@RAMPCREEK.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DAWN PALYA-MAHARRY

Name of Contact Person

at ( 740 ) 281-3236

Area Code and Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Florida Department of State.

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

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

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. THE ERDMAN FAMILY LIMITED PARTNERSHIP I  
Name of Limited Partnership or Limited Liability Limited Partnership
2. 12/21/2001 3. A01000001671  
Date of filing/registration in Florida Florida document number

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

CHARLES J ERDMAN, JR  
Name

27008 OAKWOOD LAKE DR  
Address

BONITA SPRINGS, FL 34134  
City, State and Zip

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

D'ARCY ERDMAN  
Name

27008 OAKWOOD LAKE DR  
Florida street address (P.O. Box not acceptable)

BONITA SPRINGS, FL 34134  
City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

  
Signature of General Partner

*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.*

  
Signature of Registered Agent

Filing Fee: \$35.00  
Certified Copy (optional): \$52.50

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