A01513

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DIVISION OF CORPORATION

FEB 1 8 2012 T. HAMPTON

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: SUGAR M	IILL RUINS LIMITED
Name of Florida Limited Partne	ership 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:
Patricia A Barnes	
Contact Person	
Firm/Company	
5956 Shady Creek Lane	<u> </u>
Address	
Port Orange, FL 32128	
City, State and Zip Code	
pab@cfl.rr.com	
E-mail address: (to be used for future annual rep	ort notification)
For further information concerning this matter	er, please call:
	at (<u>386</u>) <u>453-8839</u>
Name of Contact Person	Area Code and Daytime Telephone Number
Enclosed is a check for the following amount	::
\$52.50 Filing Fee \$61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fee \$113.75 Filing Fee, Certified Copy, and Certificate of Status
STREET ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations P. O. Box 6327
Clifton Building 2661 Executive Center Circle	Tallahassee, FL 32314
Tallahassee, FL 32301	Tallallassee, L J2J17

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

SUGAR N	MILL RUINS LIM	ITED		
Insert name currently	on file with Florida Dep	artment of State		
Pursuant to the provisions of section 620.120 limited liability limited partnership, whose concept to 10/10/1971, assigned	ertificate was filed w d Florida document n	ith the Florida Department o umber <u>A01513</u>		
adopts the following certificate of amendmer	nt to its certificate of	limited partnership.		
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of here:	the limited partnersh	ip or limited liability limited	<u>partnershi</u>	D
New name must be distin	nguishable and contain an	acceptable suffix.		
Acceptable Limited Partnership suffixes: Limited Par Acceptable Limited Liability Limited Partnership suff			LP.	
B. If amending mailing address and/or pr principal office address here:	incipal office addre	ss, <u>enter new mailing addr</u>	ess and/o	<u>r</u>
New Principal Office Address: (Musi be STREET address)				
New Mailing Address: (May be post office box)			 	
C. If amending the registered agent and/or renew registered agent and/or the new registered		ss on our records, enter the	name of th	<u>e</u>
Name of New Registered Agent:			<u> </u>	
New Registered Office Address:			_ 	!
	Enter Fl	orida street address	FEB	SECPI
	City	, Florida Zip Code	- 0 <u>.</u>	A. A.
	City	Zip Couc		5-7-5-7-5-7-5-7-7-5-7-7-7-7-7-7-7-7-7-7

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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.

<u>le</u>	<u>Name</u>	Address	Type of Action
<u> </u>	Beedle, Rita M	1050 Old Mission Rd New Smyrna Beach, FL 32	Add ✓ Remove
<u> </u>	Barnes, Patricia A	5956 Shady Creek Lane Port Orange, FL 32128	Add Remove
			Add Remove
			Add Remove
			Add
	 		Add Remove

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

F. If amending any other information, enter	change(s) here: (Attach additional sheets, if necessary.)
	
Effective date, if other than the date of filing:	fter the date this document is filed by the Florida Department o
Signature(s) of a general partner or all genera	al partners*:
*NOTE: Only one current general partner is required to emoving a "limited liability limited partnership" election when adding or removing a "limited liability limited partnership".	sign this document unless the limited partnership is adding or statement. Chapter 620, F.S., requires all general partners to si ership" election statement.)
. Rita M. Beedle	Date of Death:
Rita M. Beedle Patricia Barnes	
ignature(s) of all new or dissociating general	partner(s), if any:
Signature above	
Filing Fee: \$52.50 Certified Copy (optional): \$52.50	12 FE
Certificate of Status (optional): \$8.75	EB 10
	PA PA