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(Business Entity Name)

(Document Number)

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09/07/10-01034-018- \$10.00

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

D. BRUCE

SEP 30 2010

EXAMINER

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SKOBEL ENTERPRISES, LTD.

Name of Florida Limited Partnership 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:

Michael Skobel

Contact Person

Skobel Law PA

Firm/Company

8819 SW 74th Ave

Address

Gainesville, FL 32608

City, State and Zip Code

michael@skobel.com

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

For further information concerning this matter, please call:

Michael Skobel

Name of Contact Person

at ( 352 )

224-5545

Area Code and Daytime Telephone Number

10 SEP 30 PM 11:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FILED**

Enclosed is a check for the following amount:

\$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 Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

### MAILING ADDRESS:

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 13, 2010

ALEX SKOBEL  
8819 SW 74TH AVE  
GAINESVILLE, FL 32608

SUBJECT: SKOBEL ENTERPRISES, LTD.  
Ref. Number: A02000000088

We have received your document for SKOBEL ENTERPRISES, LTD. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

The fee to file your document is \$52.50. An additional \$52.50 is due for each certified copy requested and an additional \$8.75 is due for each certificate of status requested.

There is a balance due of \$17.50.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 210A00021679

10 SEP 30 PM '10  
RECEIVED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**CERTIFICATE OF AMENDMENT  
TO  
CERTIFICATE OF LIMITED PARTNERSHIP  
OF  
SKOBEL ENTERPRISES, LTD.**

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 01/22/2002, assigned Florida document number A02000000088, 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 mailing address and/or principal office address, enter new mailing address and/or principal office address here:**

New Principal Office Address:  
(Must be STREET address)

8819 SW 74th Ave  
Gainesville, FL 32608

10 SEP 30  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
FILED  
11:15 AM

New Mailing Address:  
(May be post office box)

8819 SW 74th Ave  
Gainesville, FL 32608

**C. 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:

Michael Skobel

New Registered Office Address:

8819 SW 74th Ave

*Enter Florida street address*

Gainesville, Florida 32608  
City Zip Code

**F. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)**

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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 Florida Department of State.)*

**Signature(s) of a general partner or all general partners\*:**

(\***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 statement. Chapter 620, F.S., requires all general partners to sign when adding or removing a "limited liability limited partnership" election statement.)



**Signature(s) of all new or dissociating general partner(s), if any:**

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

10 SEP 30 PM d: 14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
**FILED**