Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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Account Name : PURCELL, FLANAGAN, HAY & GREENE, P.A.

Account Number : 071722000522 Phone : (904)355-0355

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LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION SCHERER REALTY, LLLP

Certificate of Status	0
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Estimated Charge	\$52.50

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CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP

	OF ·		
SCHERER RE	ALTY LLLP		
Insert name currently or	file with Florida Depa	rtment of State	
Pursuant to the provisions of section 620.1202, limited liability limited partnership, whose cert <u>December 9, 2002</u> , assigned Fadopts the following certificate of amendment	ificate was filed wi Iorida document n	th the Florida Departmen amber <u>AO200001</u> 6	t of State on
This amendment is submitted to amend the following	g:		
A. If amending name, enter the new name of th	e lim <u>ited partnersh</u> i	p or limited liability limits	d portnerskin
here:			<u>>-</u>
New name must be distingu	iishable and contain an	acceptable suffix.	
Acceptable Limited Partnership suffixes: Limited Partne Acceptable Limited Liability Limited Partnership suffixe B. If amending mailing address and/or principal office address here:	es: Limited Liability Lir	nited Partnership, L.L.L.P. or	
New Principal Office Address: (Must be STREET address)			
New Mailing Address: (May be post office box)			
C. If amending the registered agent and/or reg new registered agent and/or the new registered o	Istered office addre	ss on our records, <u>enter th</u>	ie name of the
Name of New Registered Agent:	- 		**
New Registered Office Address:	Enter Fi	orida street address	
		, Florida	
	City	, Florida Zip Code	

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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.

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 added or removed from our records:

<u>Title</u>	Name	Address	Type of Action
	Convad + Scherer LLP	633 S. Federal Highway Ft. Landerdone, EL 33301	∠ □ Add ■ Remove
			_ □ Add _ □ Remove
			_
			_ D Add _ D Remove
			_
			_ □ 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 Partnership."
- ☐ 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.)

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F. If amending any other infor	rmation, enter chan	nge(s) here: (Attach additional sheets, if necessary.)
		
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		
		·
Effective date, if other than the dat	e of filing:	
(Effective date cannot be prior to nor mor	re than 90 days after t	the date this document is filed by the Florida Department of
<i>State.)</i> Note: If the date inserted in this block doc	es not meet the applica	sable statutory filing requirements, this date will not
be listed as the document's effective date		
<u>Signature(s) of a general partner</u>	or all general pa	irtners*:
(*NOTE: Only one current general partr removing a "limited liability limited partr when adding or removing of limited liabi	ership" election state	this document unless the limited partnership is adding or ment. Chapter 620, F.S., requires all general partners to si ip'' election statement.)
X WILLIAM R. SCHERER	<u></u>	
		
<u> </u>		
<u> </u>		
Signature(s) of all new or dissoci	iating general par	rtner(s), if any:
	 	
_		
		
		
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