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Special Instructions to F	ning Officer.	

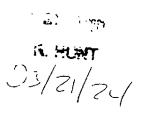
Office Use Only



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## **COVER LETTER**

TO: Registration S Division of C			
SUBJECT: The	Crycld W.	Scheul (Cir) nership or Limited Liability	F-CUITIN V, LLL Limited Partnership
The enclosed Certific	cate of Amendment an	d fee(s) are submitted f	for filing.
Please return all corr	espondence concernin	g this matter to:	
Lora	Riggs		
	Contact Person		
	Firm/Company	·	
1001 Ne	uberger K	<u>?d</u>	
Lutz.,	Address  FL 33  Sity, State and Zip Code  SHQ QIMA	549	
Kriga	State and Zip Code State and Zip Code	il.com	
E-mail address! (to	be used for future annual r	eport notification)	
For further informati	on concerning this ma		_
Lora Ri	aa S	at(127)	09-2598
Name of Contac	et Person	Area Code and Dayti	me Telephone Number
Enclosed is a check f	for the following amou	ınt:	
☐ \$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
Mailing Address: Registration Section Division of Corporat P.O. Box 6327 Tallahassee, FL 3231		Street Addre Registration S Division of C The Centre of 2415 N. Mon Tallahassee, I	Section orporations f Tallahassee roe Street, Suite 810

## CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

The Gerald W. Sc	heublein Family, LLLP on file with Florida Department of State
Insert name currently o	on file with Florida Department of State
limited liability limited partnership, whose cer	2, Florida Statutes, this Florida limited partnership or rtificate was filed with the Florida Department of State on Florida document number A0300000944, to its certificate of limited partnership.
This amendment is submitted to amend the following	ng:
A. If amending name, enter the new name of there:	he limited partnership or limited liability limited partnership
New name must be disting	guishable and contain an acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Partn Acceptable Limited Liability Limited Partnership suffix	nership, Limited, L.P., LP. or Ltd. ses: Limited Liability Limited Partnership, L.L.L.P. or LLLP.
B. If amending mailing address and/or pri principal office address here:	ncipal office address, enter new mailing address and/or
New Principal Office Address:	
(Must be STREET address)	
New Mailing Address: (May be post office box)	
	PH 2:
C. If amending the registered agent and/or registered agent and/or the new registered office	stered office address on our records, enterthe Pame of the new eaddress here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	City Zip 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.

If Changing Remotered A	cent Cionatura of Name	Decisional Asses
If Changing Registered Ag	Rent' Siknarnie of Mem	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>	<u>Name</u>	Address	Type of Action
(General Partner)	Gerald W. Scheub	lein 18950 Fullon Co Land O'Lakes, FL 3462	Rivel Est D Add R D Remove
GP	<u>Kaven Scheubleir</u>	) 18950 Falton Crest Land o'lakes, Fl 3463	Bivel Add Add Remove
GP	Gerald W. Scheube Rev. FounilyTrust UTD: 4/12/1991	in 18950 Fulconcres+B Land o'Lakes, FC 34630	Madd
<u>6P</u>	W. v. C. 11	ein 18950, Falcon Cres Land O'Lukes, FC 346:38	Biv d 2 Add 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 Lia	ibility Limited	Partnership."
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(NOTE: If adding or removing" limited liability limited partnership" status, all general partners must sign this amendment.)

This Limited Partnership hereby removes its "Limited Liability Limited Partnership" status.

State.)	er the date this document is filed by the Florida Department of
Note: If the date inserted in this block does not meet the appose listed as the document's effective date on the Department	licable statutory filing requirements, this date will not of State's records.
Signature(s) of a general partner or all general	partners*:
(*NOTE: Only one current general partner is required to sign removing a "limited liability limited partnership" election stawhen adding or removing a "limited liability limited partners	tement. Chapter 620, F.S., requires all general partners to sign
And w phill	xx aren Scherle
<i>t</i> -	
Signature(s) of all new or dissociating general p	artner(s), if any:
x Head w Sl	x Rosen School ou
<u> </u>	
<del></del>	
Filing Fee: \$52.50	
Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	