

A03000000 1083

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FL

SEP - 7 2021



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

2021 SEP -1 PM 2:20

August 24, 2021

ROBERT GRECO  
5103 SW 13TH AVE  
CAPE CORAL, FL 33914

SUBJECT: LINCOLN GROUP PROPERTIES LIMITED PARTNERSHIP  
Ref. Number: A03000001083

We have received your document for LINCOLN GROUP PROPERTIES LIMITED PARTNERSHIP and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a LIMITED LIABILITY COMPANY, but your entity is a LIMITED PARTNERSHIP. Please complete and return the enclosed blank form(s).

There is a fee of \$10.00 due.

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) 245-6050.

Catherine M Brumbley  
Regulatory Specialist II

Letter Number: 021A00020268

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: LINCOLN GROUP PROPERTIES LTD PARTNERSHIP  
Name of Limited Partnership or Limited Liability Limited Partnership

DOCUMENT NUMBER: A03000001083

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:

ROBERT GRECO  
Contact Person

Firm/Company

5103 SW 13 AVE  
Address

CAPE CORAL, FL 33914  
City, State and Zip Code

ROBERT GRECO @MAC.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROBERT GRECO at ( 239 ) 980-8200  
Name of Contact Person Area Code and Daytime Telephone Number

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

**Mailing Address:**

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

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**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. LINCOLN GROUP PROPERTIES LTD. PARTNERSHIP  
Name of Limited Partnership or Limited Liability Limited Partnership

2. 7-29-2003  
Date of filing/registration in Florida

3. A03000001083  
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:

ROBERT GRELO  
Name  
1507 SW 58 LANE  
STAG BOKER AVE  
Address  
CAPE CORAL, FL 33914  
City, State and Zip

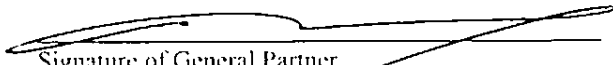
5. The name and Florida street address of the new registered agent and/or office:

ROBERT GRELO  
Name  
5103 SW 13 AVE  
Florida street address (P.O. Box not acceptable)  
CAPE CORAL FL 33914  
City, State and Zip

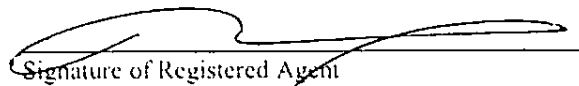
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SECRETARY OF STATE  
TALLAHASSEE, FL.

FILED

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**