A0300001208

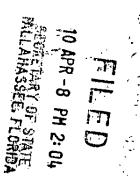
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Prione #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400174860324

04/08/10--01018--017 **52.50



D. BRUCE

APR 9 2010

EXAMINER

COVER LETTER

TO:	Registration Division of C				
SUBJ	ECT:	The Fitzpatric	k Family Limited	l Partnership	
	Na	me of Florida Limited Par			hip
The e	nclosed Certifi	cate of Amendment a	nd fee(s) are submitt	ed for filing.	
Please	e return all cort	respondence concerni	ng this matter to:		
	Ве	ernard J. Fitzpatrick			
- "		Contact Person			
		Firm/Company			
		PO Box 789			
		Address			**
		Okeechobee			
		City, State and Zip Code			A A
					E 5
	· -	Florida 34973-0789 be used for future annual	report potitionties)		
1:	e-man address: (te	the used for future annual	report notification)		# F F
For fu	ırther informat	ion concerning this m	atter, please call:		ENVO.
	Bernard	l Fitzpatrick	_at (<u>863</u>)_	532-9555	
	Name of Conta	act Person	Area Code and I	Daytime Telephone N	umber
Enclo	sed is a check	for the following amo	ount:		
√ \$52	2.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fe and Certified Copy	ce \$113.75 Filin Certified Copy, Certificate of S	, and
STR	EET ADDRES	SS:	MAILIN	G ADDRESS:	
	tration Section			on Section	
	ion of Corpora	tions		of Corporations	
	n Building	. 0. 1	P. O. Box		
	Executive Cen		Tallahass	ee, FL 32314	
l'alla	hassee, FL 323	301			

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

Fitzpatrick Family Limited Partnership

Insert name currently on file with Florida Department of State

Pursuant to the provisions of section 620.1202, limited liability limited partnership, whose cert 08/25/03, assigned F	ificate was filed	
adopts the following certificate of amendment t		
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the here:	e limited partne	ship or limited liability limited partnership
New name must be distingu	ishable and contain	an acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Partne Acceptable Limited Liability Limited Partnership suffixe		
B. If amending mailing address and/or printerprincipal office address here: New Principal Office Address: (Must be STREET address) New Mailing Address: (May be post office box) C. If amending the registered agent and/or registered agent and/or the new registered of	istered office ad	dress on our records, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
	Ente	r 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 Registered Agent	, Signature of New Registered Agent	

D.	lf	amending	the general	partner(s),	enter the	name	and	<u>business</u>	address	of eac	ch general	partner	being
ado	lec	<u>l or remo</u> ve	d from our	records:									

<u>Title</u>	<u>Name</u>	Address	Type of Action
	See "F." Below		Add Remove
	-		Add Remove
	-		Add 10 APR -8
			Remove 3
			□ Kemove
			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.)

F. If amending any other information, e	nter change(s) here: (Attach	additional sheets, if necessary.)
Amend General Partner		
From- Rocky Mountain High Hospitality,	LLC (Doc.# L03000031	533)
To- Rocky Mountain High Hospitality,	LLC (Doc.# L09000014	327)
Effective date, if other than the date of filing (Effective date cannot be prior to nor more than 90 c State.)	3: lays after the date this document	is filed by the Florida Department of
Signature(s) of a general partner or all general partner is required removing a "limited liability limited partnership" elewhen adding or removing a "limited liability limited	red to sign this document unless oction statement. Chapter 620, F	.S., requires all general partners to sign
Signature(s) of all new or dissociating gen		
Benall Hutet Gene. for	ROCKY MOUNTAN A Dar # Los	1164 HOSPITALITY, LCC
benefit forthe 60 ms for	ROCKY MOUNTOIN DOCK L	HIGH HOSPITHLITY, LLC.
Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75		10 APR -8 PM
	Page 3 of 3	い。口