

A0300000 1243

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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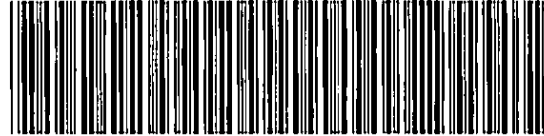
(Business Entity Name)

(Document Number)

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D. PRICE  
OCT 27 2018

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** BULLIS FAMILY PARTNERSHIP, LTD  
Name of Limited Partnership or Limited Liability Limited Partnership

**DOCUMENT NUMBER:** A03000001243

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:

Sean L. Wilson

Contact Person

Law Office of Sean L. Wilson

Firm/Company

1880 N. Congress Ave., Ste. 205

Address

City, State and Zip Code

Boynton Beach, Florida 33426

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

For further information concerning this matter, please call:

Sean L. Wilson

at ( 954 )

575-3360

Name of Contact Person

Area Code and Daytime Telephone Number

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

**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

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2010 OCT 16 PM 3:54  
TALLAHASSEE FLORIDA  
STATE DEPARTMENT OF STATE

**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. Bullis Family Partnership, Ltd.  
Name of Limited Partnership or Limited Liability Limited Partnership
2. 08/29/2003 3. A03000001243  
Date of filing/registration in Florida 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:

Sean L. Wilson  
Name  
2385 NW Executive Center Drive, Ste. 100  
Address  
Boca Raton, Florida 33431  
City, State and Zip

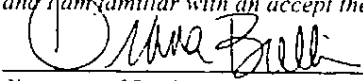
5. The name and Florida street address of the new registered agent and/or office:

Diana Bullis  
Name  
8699 Sawpine Road  
Florida street address (P.O. Box not acceptable)  
Delray Beach FL 33446  
City, State and Zip

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

**FILED**  
2018 OCT 15 PM 3:04  
FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA