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## COVER LETTER

<b>TO:</b> Registration Division of	Section Corporations			
SUBJECT: TIMM	FAMILY PARTNERS, LLI	LP		
	lame of Florida Limited Pa	rtnership or Limited Liabili	y Limited Partnership	
The enclosed Certif	ficate of Amendment a	nd fee(s) are submitted	for filing.	
Please return all co	rrespondence concerni	ng this matter to:		
BRUCE B. TIMM				
	Contact Person	·		
TIMM FAMILY PART	NERS, LLLP			
	Firm/Company			
12346 EAGLE CHAS	E WAY			
	Address			
NEW PORT RICHEY.	FL34655			
· · · · · · · · · · · · · · · · · · ·	City, State and Zip Code			
BBTIMM3@MAC.C	ОM			
E-mail address: (t	o be used for future annual	report notification)		
For further informa	tion concerning this m.	atter, please call:		
BRUCE B. TIMM		727 375- at (	0913	
Name of Cont	act Person		time Telephone Number	
Enclosed is a check	for the following amo	unt:		
■ \$52.50 Filing Fee	☐S61.25 Filing Fee and Certificate of Status	☐\$105.00 Filing Fee and Certified Copy	□\$113.75 Filing Fee, Certified Copy, and Certificate of Status	
STREET ADDRESS:		MAILING A	ADDRESS:	
Registration Section		Registration Section		
Division of Corporations		Division of C		
Clifton Building 2661 Executive Cer	nter Circle	P. O. Box 6327 Tallahassee, FL 32314		
Tallahassee, FL 32		rananassee.	115 32317	

#### CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

TIMM FAMILY PARTNERS, LLLE	,					
Insert name eu	rrently on	file with Florida Departm	ent of State		_	
Pursuant to the provisions of section 63 limited liability limited partnership, wh MAY 28, 2004 as	iose certi signed Fl	ficate was filed with t lorida document num	the Florida Depar ber A0400000886	rtment of		on 
adopts the following certificate of ame	ndment to	o its certificate of lim	ited partnership.			
This amendment is submitted to amend the	following	:				
A. If amending name, enter the new na here:	me of the	limited partnership o	r limited liability	limited pa	<u>artner</u>	<u>ship</u>
New name must b	e distingui	shable and contain an acco	eptable suffix.			
Acceptable Limited Partnership suffixes: Limit Acceptable Limited Liability Limited Partners)	ed Partner. up suffixes.	ship, Limited, L.P., LP, or Limited Liability Limited	· Ltd. I Partnership, L.L.L.	P. or LLLE	<b>)</b> .	
B. If amending mailing address and principal office address here:	or princ	ipal office address, g	enter new mailin	<u>ig addres</u>	is and	<u>l/or</u>
New Principal Office Ad	dress:	12346 EAGLE CHAS	E WAY			
(Must be STREET address)		NEW PORT RICHEY	, FL 34655			
New Mailing Address: (May be post office box)		12346 EAGLE CHAS NEW PORT RICHEY			· -	
C. If amending the registered agent and new registered agent and/or the new regi			n our records, <u>en</u> t	ter the na	17 me of	f the
new registered agent and/or the new regis	Mercu on	ice address here.			3 1 7	;=:
Name of New Registered Agent:				1214	P	Ţ.:
New Registered Office Address:		S EAGLE CHASE WAY	<del></del> -	<u> </u>	0:3	
			a street address		96	
	NEW	PORT RICHEY	Florida 34655			
		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. 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
			_ □ Add □ Remove
			_ □ Add □ Remove
			_
	<del></del>		Add
			_ □ 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,	enter change(s)	here: (Attach additio	onal sheets, if necessary.)
<del></del>			
Effective date, if other than the date of filli (Effective date cannot be prior to nor more than 96 State.)	ng:	e this document is filed	by the Florida Department of
Note: If the date inserted in this block does not me be listed as the document's effective date on the Do			ents, this date will not
Signature(s) of a general partner or all s	eneral partne	rs*:	
/*NOTE: Only one current general partner is requ			ted partnership is adding or
removing a "limited liability limited partnership" e when adding or removing a "limited liability limite	lection statement.	Chapter 620, F.S., requ	
June Jimm	_		<u> </u>
BRUCE B. TIMM, MAÑAGING GENERAL PAR	<b>-</b>		
	_		
Signature(s) of all new or dissociating go	- eneral nartner(	(s) if any	
Organization of an new or answerment	The same of the sa	<u> </u>	
	_		
	_	<b></b>	
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	-		A
Filing Fee: \$52.50			AUG I
Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75			17 PM
			25 <b>13</b>
	Page 3 of 3	ı	864 11 c <b>86</b>