

A04074

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. SAULSBERRY
EXAMINER

DEC 22 2011

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: T P R Associates, Ltd.
Name of Limited Partnership or Limited Liability Limited Partnership

DOCUMENT NUMBER: A04074

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:

Debra Millinowisch

Contact Person

Quarles & Brady LLP

Firm/Company

300 N. LaSalle Street, Suite 4000

Address

Chicago, IL 60654

City, State and Zip Code

jimleider@gmail.com

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

For further information concerning this matter, please call:

Debra Millinowisch

Name of Contact Person

at (312)

715-5000

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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TALLAHASSEE, FLORIDA

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**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. T P R Associates, Ltd.
Name of Limited Partnership or Limited Liability Limited Partnership

2. 12/6/1974 3. A04074
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:

Naples-Lawdock, Inc.
Name
1395 Panther Lane, Suite 300
Address
Naples, FL 34103
City, State and Zip

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

M. James Leider
Name
8325 State Road 7
Florida street address (P.O. Box not acceptable)
Boynton Beach FL 33472
City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.
The Leider Horticultural Companies, Inc.

By: M. James Leider President CHAIRMAN
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.

M. James Leider
Signature of Registered Agent

Filing Fee: \$35.00
Certified Copy (optional): \$52.50

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TALLAHASSEE, FLORIDA

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