DOCUMENT # A05000001341 1. Entity Name			A P	FILED SECRETARY OF STATE DIVISION OF CORPORATIONS
POLLY FAMILY, LLLP				U6 AUG 22 AM 9: 54
Principal Plac	ce of Business	Mailing Address	I	
2901 SOU	TH OCEAN BOULEVARD D BEACH FL 33487	2901 SOUTH OCE, HIGHLAND BEACH		
2. Principal Place of Business		3. Mailing Address	Websites.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		2nd MOORE CR2E003 (4/06)
City & Sta	ite	City & State		4. FEI Number Applied For Not Applicable
Zip 	Country	Zip	Country	5. Certificate of Status Desired \$8.75 Additional Fee Required
	6. Name and Address of Cu	urrent Registered Agent	Name .	7. Name and Address of New Registered Agent
RAYMOND, JOHN J JR C/O BUTZEL LONG 1200 N. FEDERAL HWY., #420 BOCA RATON FL 33432		t	TARVEY POLLY ess (P.O. Box Number is Not Acceptable) I SOUTH DEAN BIVD HILAND BEACH FL Zip Code 9	
in the Stat	e named entity submits this statemete of Florida. I am familiar with, and	ent for the purpose of changing laccept the obligations of register	its registered office or regis red agent.	stered agent, or both, S.607.193(2)(b), F.S., allows for the waiver of
in the Stat	te of Florida. I am familiar with, and Signature, typed or prived name of performed. File Now!!! Fee is A GENERAL PARTN	accept the obligations of register agent and title if applicable \$ \$900.00 • Due B NER THAT IS A BUSINESS	ed agent. A CA DATE OAT OAT ENTITY MUST BE RE	stered agent, or both, S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the limited partnership certifies it did not receive prior notice. Fee to file is \$500.00. GISTERED AND ACTIVE WITH THIS OFFICE.
in the Stat	Signature, typed or private name of page and a Signature. Signature of Power name of page and a Signature. Signature of Power name of page and a Signature. Signature of Power name of page and a Signature of Power name of Power	accept the obligations of register agent and title if applicable \$ \$900.00 • Due B NER THAT IS A BUSINESS	ed agent. A CA DATE OAT OAT ENTITY MUST BE RE	stered agent, or both, S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the limited partnership certifies it did not receive prior notice. Fee to file is \$500.00.
in the Stat SIGNATURE 12. DOCUMENT # NAME	Signature, typed or pithed name of processors File Now!!! Fee is A GENERAL PARTIN NOTE: General Partner GENERAL PAI POLLY, HARVEY	agont and title if applicable S \$900.00 Due B NER THAT IS A BUSINESS IS MAY NOT be changed of	ed agent. ODAT ODAT OPEN SEPTEMBER 6, ENTITY MUST BE RECE In the form; an amend	stered agent, or both, S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the limited partnership certifies it did not receive prior notice. Fee to file is \$500.00. GISTERED AND ACTIVE WITH THIS OFFICE. Iment must be filed to change a general partner. ADDRESS CHANGES ONLY
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IN THE STATE SIGNATURE 12. DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or privee name of performed. File Now!!! Fee is A GENERAL PARTN NOTE: General Partner GENERAL PAI POLLY, HARVEY 2901 SOUTH OCEAN BOULE HIGHLAND BEACH FL 3348	accept the obligations of register agent and title if applicable S \$900.00 Due B NER THAT IS A BUSINESS IS MAY NOT be changed of RINER INFORMATION EVARD 7	y September 6, ENTITY MUST BE RECONSTRUCTION AND ADDRESS	Stered agent, or both, S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the limited partnership certifies it did not receive prior notice. Fee to file is \$500.00. 2006 GISTERED AND ACTIVE WITH THIS OFFICE. Iment must be filed to change a general partner. ADDRESS CHANGES ONLY
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