

A05000002132

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA  
2013 DEC -2 AM 11:38

B. BOSTICK  
DEC - 5 2013  
EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Boyd Holdings Family Limited Partnership  
Name of Limited Partnership or Limited Liability Limited Partnership

**DOCUMENT NUMBER:** A05000002132

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:

Anne J. McPhee, Esq.  
Contact Person  
Snyder & Snyder, P.A.  
Firm/Company  
7931 S.W. 45th Street  
Address  
Davie, Florida 33328  
City, State and Zip Code  
anne@snyderlawpa.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Anne J. McPhee, Esq. at ( 954 ) 475-1139  
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

2010 DEC -2 AM 11:38  
TALLAHASSEE, FL 32314

**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. Boyd Holdings Family Limited Partnership  
Name of Limited Partnership or Limited Liability Limited Partnership
2. Effective date 01/02/2006 3. A05000002132  
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:

Patrick M. Boyd  
Name  
6400 Hollywood Boulevard  
Address  
Hollywood, FL 33024  
City, State and Zip

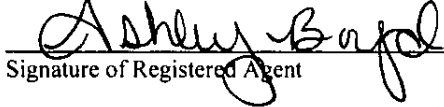
5. The name and Florida street address of the new registered agent and/or office:

Ashley L. Boyd  
Name  
6400 Hollywood Boulevard  
Florida street address (P.O. Box not acceptable)  
Hollywood FL 33024  
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**

2019 DEC -2 AM 11:38  
CLERK OF COURT  
FALL ARASEE, FL 09107