

A06 000001006

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

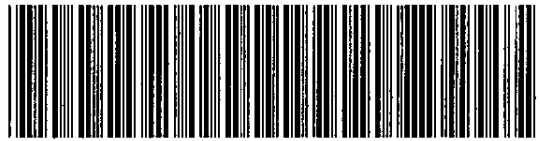
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500139044745

12/22/08--01040--006 \*\*86.25

500139044745  
12/31/08--01024--011 \*\*27.50

T. CLINE

MAR 11 2009

EXAMINER

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2009 JAN -5 PM 2:11

FILED

A06-1004



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 5, 2009

ROBERT MCCONNELL, JR.  
5005 SHENANDOAH LANE PLACE  
BATON ROUGE, LA 70817

SUBJECT: MADEIRA WACO, LTD.  
Ref. Number: A06000001006

We have received your document for MADEIRA WACO, LTD. and your check(s) totaling \$113.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the dissociating general partner unless the document states the general partner is deceased or a guardian or general conservator has been appointed or the general partner previously filed a Statement of Dissociation with the Florida Department of State.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline  
Regulatory Specialist II

Letter Number: 909A00000061

2009 JAN -5 PM 2:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 23, 2008

ROBERT MCCONNELL, JR.  
5005 SHENANDOAH LANE PLACE  
BATON ROUGE, LA 70817

SUBJECT: MADEIRA WACO, LTD.  
Ref. Number: A06000001006

We have received your document for MADEIRA WACO, LTD. and your check(s) totaling \$86.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

The effective date must be specific and cannot be prior to the date of filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline  
Regulatory Specialist II

Letter Number: 908A00061469

FILED  
2009 JAN -5 PM 2:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Madeira Waco, Ltd.  
(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

The enclosed Certificate of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Rob McConnell  
(Contact Person)  
Madeira Waco, Ltd.  
(Firm/Company)  
P.O. Box 86957  
(Address)  
Baton Rouge, LA 70879-6957.  
(City, State and Zip Code)

For further information concerning this matter, please call:

Rob McConnell at ( 225 ) 218-8960  
(Name of Contact Person) (Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$52.50 Filing Fee

☐ \$61.25 Filing Fee  
and Certificate of  
Status

☐ \$105.00 Filing Fee  
and Certified Copy

☒ \$113.75 Filing Fee,  
Certified Copy, and  
Certificate of Status

\$ 86.25  
27.50  
\$ 113.75

**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

2009 JAN -5 PM 2:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

CERTIFICATE OF AMENDMENT  
TO  
CERTIFICATE OF LIMITED PARTNERSHIP  
OF

Maideira Waco, Ltd.

(Insert name currently on file with Florida Department of State)

Pursuant to the provisions of section 620.1202, Florida Statutes, this Florida limited partnership or limited liability limited partnership, whose certificate was filed with the Florida Department of State on 08/11/06, assigned Florida document number LOC 00007347701006, adopts the following certificate of amendment to its certificate of limited partnership.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited partnership or limited liability limited partnership here:**

(New name must be distinguishable and contain an acceptable suffix.)

*Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.*

*Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.*

**B. If amending mailing address and/or principal office address, enter new mailing address and/or principal office address here:**

New Principal Office Address:  
(Must be STREET address)

5005 Shenandoah Lane Place  
Baton Rouge, LA 70817

New Mailing Address:  
(May be post office box)

P.O. Box 86957  
Baton Rouge, LA 70879-6957

**C. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

(Enter Florida street address)

(City)

, Florida

(Zip Code)

2009 JAN -5 PM 2:11  
SECRETARY  
TALLAHASSEE  
STATE  
FLORIDA

FILED

**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>	<u>Address</u>	<u>Type of Action</u>
_____	<u>Anchor Development Group, LLC</u>	<u>19614 Noodland Manor Pl.</u> <u>Lutz, FL 33549</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
_____	<u>NEK Ventures, LLC</u>	<u>5005 Shenandoah Lane Pl.</u> <u>Baton Rouge, LA 70817</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> 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 additional sheets, if necessary.)

Effective date, if other than the date of filing: 01/05/09  
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

**Signature(s) of a general partner or all general partners\*:**

(\*NOTE: Only one current general partner is required to sign this document unless the limited partnership is adding or removing a "limited liability limited partnership" election statement. Chapter 620, F.S., requires all general partners to sign when adding or removing a "limited liability limited partnership" election statement.)

NEK Ventures, LLC

*Robert McConnell*

By: Robert E. McConnell, Jr.  
Managing Member

**Signature(s) of all new or dissociating general partner(s), if any:**

ANCHOR DEVELOPMENT GROUP, LLC

*JFC*

By: John F. Calder

Managing Member

Filing Fee: \$52.50  
Certified Copy (optional): \$52.50  
Certificate of Status (optional): \$8.75

2009 JAN -5 PM 2:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA