Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : HENDEE MCKERNAN SCHROEDER WILKERSON & HENDEE PA

Account Number : 119988888866 Phone : (813)258-1177
Fax Number : (813)259-1186

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. ..

ibeattie@hendeelaw.com Email Address:\_\_\_

### LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION TARPON HOUSE, LLLP

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850-617-6381

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December 29, 2020

FLORIDA DEPARTMENT OF STATE Division of Corporations

TARPON EOUSE, LLLP 1700 SOUTH MACDILL AVENUE STE. 340 TAMPA, FL 33629

SUBJECT: TARPON HOUSE, LLLF

REF: A06000001011

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document must be signed by a current general partner. if any, and by each newly designated general partner(s).

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 filling of your document, please call  $(850)\ 245-6051$ .

Karen A Saly Regulatory Specialist II

FAX Aud. #: H20000415253 Letter Number: B20A00826200

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### **COVER LETTER**

TO:	Registration S Division of Co				
SURI	ECT: Tempon Ho	ruse, LLLP			
3012	Nan	e of Florida Limited Partn	ership or Limit	ed Lizbility	Limited Partnership
The e	nclosed Certific	ate of Amendment and	i fee(s) are st	ibmitted f	or filing.
Please	e return all corre	spondence concerning	this matter t	ю:	
Peter I	B. McKeman II, Es	quire			
		Contact Person			
Hende	e, McKernan, Schr	oeder, Wilkerson & Hende	<b>≈,</b> P.A.		
		Firm/Company			
1700	South MacDill Ave	nue, Svite 200			
	<del></del>	Address			
Тетр	a, Florida 33629				
<del></del>	С	ity, State and Zip Code			
ibeat	tie@hendeeiaw.cor	n			
	E-mail address: (to	be used for future annual r	eport notification	n)	
For fi	urther informati	on concerning this mar	tter, please ci	ail:	
Peter	B. McKerman II		at ( 813	258-1	177
	Name of Conta	at Person	Area Co	te and Dayt	ime Telephone Number
Enek	ose <del>d is a check (</del>	or the following amou	int: Charged	to Sunbia	E-File Account
<b>= \$</b> 5	2.50 Filing Foa	C)\$61.25 Filing Fee and Certificate of Status	D\$105.00 F and Certified	-	Cl\$113.75 Filing Foo, Certified Copy, and Certificate of Status
Regi Divi P.O.	stration Section sion of Corporal Box 6327 shassee, FL 323		Rep Div The 24	e Centre o 15 N. Mor	

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TALLAHASSETT FLORION

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# CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

Gr Gr	
Tarpon House, LLLP	
Insert name currently on file with Florida Department of State	
Pursuant to the provisions of section 620.1202, Florida Statutes, this Florida limited partners limited liability limited partnership, whose certificate was filed with the Florida Department August 15, 2006 assigned Florida document number A06000001011	hip or of State on
adopts the following certificate of amendment to its certificate of limited partnership.	
This amendment is submitted to amend the following:	
A. If sevending name, <u>enter the new name of the limited partnership or limited liability limited</u> here:	partnership
New name must be distinguishable and contain an acceptable suffix.	<u> </u>
Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., L.P., or l.id. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or L	
B. If amending mailing address and/or principal office address, enter new mailing address principal office address here:	iress and/or
New Principal Office Address: (Must be STREET address)	
New Mailing Address: (May be past office bax)	<u> </u>
C. If amending the registered agent and/or registered office address on our records, enter the na registered agent and/or the new registered office address here:	ime of the nev
Name of New Registered Agent:	
New Registered Office Address:  Enter Flarida street address	
, Florida	
City Zip Code	ı
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Page 1 of 3	

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TALLAHASSEE F UNIÓN

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#### 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>	Name	Address	Type of Action
General Partner	Tarpon House GP, LLC	1700 South MecDill Avenue Suite 340 Temps, Florida 33629	_ O Add G Remove
General Partner	Targon House Management, LLC	1700 South MacDill Avenue   Suite 340   Tampa, Florida 33629	Add Remove
			Add   Remove
			O Add O Remove
			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.)

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ctive date, if other than the date of filing:	15-
	r the date this document is filed by the Florida Department of.
): If the date inserted in this block does not meet the appl	licable statutory filing requirements, this date will not
ted as the document's effective date on the Department	of State 3 feedings.
nature(s) of a general partner or all general	partners*:
tttto sign	on this document unless the limited partnership is adding or
oving a "limited liability limited partnership" election sta en adding or removing a "limited liability limited partners	Hement, Chapter 020, 1:33, reduces an Secretary
en adding of removing a "firmited listofficy finance purelet.	,
Jundy (ATT) Manager of	Tarpon House GP, LLC
Manager of	Tarpon House Management, LLC
Joy V- Fifth , Wallager of	
nature(s) of all new or dissociating general p	partner(s), if any:
3 / 27	Tarpon House GP, LLC (dissociating GP)
Manager of	
Manager of	Tarpon House Management, LLC (New GP)
sur y 1112	
<del></del>	
iling Fee: \$52.50	
ertified Copy (optional): \$52.50	
ertificate of Status (optional): \$8.75	