# A0600000 1466

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### COVER LETTER

TO: Registration Division of	Section Corporations				
SUBJECT: The Co	ndee Family Limited Partne	ership			
SOBJECT:	Name of Florida Limited Par	tnership or Limited Liabili	y Limited Partnership		•
The enclosed Certi	ficate of Amendment a	nd fee(s) are submitted	for filing.		
Please return all co	rrespondence concerni	ng this matter to:			
Charlotte A Husted					
	Contact Person				
	Firm/Company				
380 3rd Ave					``# ≤.a
	Address			19 HAR	- 75 f
Marco Isand FL 34145	;			25. 20.	
	City, State and Zip Code			-7	2. 2.
Hustedch26@gmail.c	om				- 15 Q
E-mail address: (	to be used for future annual	report notification)		9: 09	STATE
For further informa	ation concerning this m	atter, please call:			S
Charlotte A Husted		at ()	0547		
Name of Con	tact Person	Area Code and Day	time Telephone Numbe	r	
Enclosed is a check	c for the following amo	unt:			
☐ \$52.50 Filing Fee	■\$61.25 Filing Fee and Certificate of Status	☐\$105.00 Filing Fee and Certified Copy	☐\$113.75 Filing Fed Certified Copy, and Certificate of Status	e,	
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle		MAILING Registration Division of P. O. Box 63 Tallahassee,	Section Corporations 327		

Tallahassee, FL 32301

#### CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

The Condee Family Limited Partnership	
Insert name currently on file with Florida Department of St	tate 9. 3.
Pursuant to the provisions of section 620.1202, Florida Statutes, this Florida limited liability limited partnership, whose certificate was filed with the Flo December 13, 2006, assigned Florida document number A00	limited partnership or rida Department of State on
adopts the following certificate of amendment to its certificate of limited pa	rtnership.
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited partnership or limite</u>	ed liability limited partnership
N/A	
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 Partne  B. If amending mailing address and/or principal office address, enter r principal office address here:	-
New Principal Office Address:  (Must be STREET address)	
New Mailing Address: (May be post office box)	
C. If amending the registered agent and/or registered office address on our inew registered agent and/or the new registered office address here:  Name of New Registered Agent:	records, enter the name of th
New Registered Office Address:	

City

Enter Florida street address

#### 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>	Address	Type of Action
GP	Mary L Condee (deceased)	380 3rd Ave Marco Island FL 34145	□ Add ■ Remove
<u>GP</u>	Donald E Condee	442 Driftwood Court Marco Island FL 34145	
<u>GP</u>	Charlotte Husted	380 3rd Ave Marco Island FL 34145	■ Add □ Remove
<u>GP</u>	John Reynolds	160 Golden Gate Blvd W Nales FL 34120	■ Add □ Remove
<u>GP</u>	Janet Reynolds	7462 Inspiria Drive Apt # 4-407 Naples FL 34113	
GP	Brett Reynolds	556 Marco Lake Dr Marco Island FL 34145	

E. If the limited partnership or limited liability limited partnership is amending its "limited liability limited partnership" status, enter change here:

□ Th	is Limited	Partnership	hereby	elects to be a	"Limited	Liability	Limited	Partnership."
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☐ 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.)

Add - GP - Donna Spencer - 1003 North Madis	enter change(s) here: (Attach additional sheets, if necessary.) on Street Litchfield IL 62056
	<del> </del>
Effective date, if other than the date of filir (Effective date cannot be prior to nor more than 90 State.)	ng: days after the date this document is filed by the Florida Department of
Note: If the date inserted in this block does not mee	et the applicable statutory filing requirements, this date will not
be listed as the document's effective date on the De	partment of State's records.
Signature(s) of a general partner or all g	general partners*:
	ired to sign this document unless the limited partnership is adding or
removing a "limited liability limited partnership" e when adding or removing a "limited liability limite	lection statement. Chapter 620, F.S., requires all general partners to sign dipartnership" election statement.)
~ /	,
Charlow attented	
	<del></del>
Signature(s) of all new or dissociating go	eneral partner(s), if any:
Filing Fee: \$52.50 Certified Copy (optional): \$52.50	
Certificate of Status (optional): \$8.75	