

A07000000467

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BIRKENWALD FAMILY LIMITED PARTNERSHIP

Name of Limited Partnership or Limited Liability Limited Partnership

DOCUMENT NUMBER: A07000000467

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:

RICHARD BIRKENWALD

Contact Person

BIRKENWALD FAMILY LIMITED PARTNERSHIP

Firm/Company

95 S SEWALLS POINT ROAD

Address

STUART, FL 34996

City, State and Zip Code

birkenwa@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RICHARD BIRKENWALD

Name of Contact Person

at (954)

559-4421

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

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