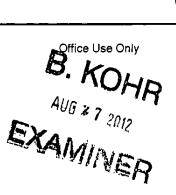
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(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Na	me)
(Do	ocument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE ON STORY OF CORPORATIONS

12 AUG 10 AM L: Se

TODD WATSON

ATTORNEY AND COUNSELOR AT LAW, P.L.

SUITE 721 12276 SAN JOSE BOULEVARD JACKSONVILLE, FLORIDA 32223

TELEPHONE (904) 739-9747 FACSIMILE (904) 739-9748 mail@toddwatsonlaw.com LES 10 FR S.

<u>VIA FEDEX OVERNIGHT DELIVERY</u> 7938 8635 1172

August 9, 2012

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: GJL Partners, LLLP

Dear Sir/Madam:

We apologize for the delay in bringing this entity up to date. Due to the deaths of the General Partners, notice of renewal was not received. Enclosed is the following:

- 1. A Cover Letter;
- 2. A Certificate of Amendment to Certificate of Limited Partnership of GJL Partners, LLLP; and
- 3. Our firm check for \$52.50.

Once the Amendment has been filed, we will file the Annual Report online.

I am available at your convenience should you have any questions or comments concerning this matter.

Sincerely.

Whenelle Slocun Legal Assistant

/kms

Enclosures



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 14, 2012

MICHELLE SLOCUM TODD WATSON ATTORNEY 12276 SAN JOSE BLVD., STE. 721 JACKSONVILLE, FL 32223

SUBJECT: GJL PARTNERS, LLLP Ref. Number: A07000000769

We have received your document for GJL PARTNERS, LLLP and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

In addition to the new General Partner, the withdrawing General Partners must also sign the amendment.

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) 245-6051.

Buck Kohr Regulatory Specialist II

Letter Number: 012A00020978

www.sunbiz.org

er my telephone conversation with weer effice, we readable "Deceased" beside the manes of the verse fortness Lordon R. Lohman and areal fortness Lordon R. Lohman and and ann Lohman, as instructed,

COVER LETTER

TO: Registration Section Division of Corporations	್ರ -				
SUBJECT: GJL Partners, LLLP Name of Florida Limited Partnership or Limited Liability Limited Partnership					
The enclosed Certificate of Amendment an	d fee(s) are submitted for filing.				
Please return all correspondence concernin	g this matter to:				
Todd Watson					
Contact Person					
Todd Watson, Attorney and Counseld	or at Law, P.L.				
Firm/Company					
12276 San Jose Boulevard, Si	uite 721				
Address					
Jacksonville, FL 32223	.				
City, State and Zip Code					
knlohman@aol.com					
E-mail address: (to be used for future annual	report notification)				
For further information concerning this ma	itter nlease call:				
To rather information concerning this me	itter, pieuse euri.				
Todd Watson	at (904) 739-9747				
Name of Contact Person	Area Code and Daytime Telephone Number				
Enclosed is a check for the following amou	ınt:				
\$52.50 Filing Fee \$61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fee and Certified Copy Certified Copy, and Certificate of Status				
STREET ADDRESS:	MAILING ADDRESS:				
Registration Section Registration Section					
Division of Corporations Division of Corporations					
Clifton Building P. O. Box 6327					
2661 Executive Center Circle Tallahassee, FL 32301	Tallahassee, FL 32314				

CERTIFICATE OF AMENDMENT CERTIFICATE OF LIMITED PARTNERSHIP

2 Melon	A STORY
	Or Top

	artners, LLLP Tile with Florida Department of State
insert name currently on I	the with Florida Department of State
limited liability limited partnership, whose certif	Florida Statutes, this Florida limited partnership or ficate was filed with the Florida Department of State on orida document number <u>A0700000769</u> , o its certificate of limited partnership.
This amendment is submitted to amend the following:	:
A. If amending name, enter the new name of the here:	limited partnership or limited liability limited partnership
New name must be distinguis	shable and contain an acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Partner. Acceptable Limited Liability Limited Partnership suffixes.	
B. If amending mailing address and/or princ principal office address here:	cipal office address, enter new mailing address and/or
New Principal Office Address:	
(Must be STREET address)	
New Mailing Address: (May be post office box)	2732 Woodley Place NW Washington, DC 20008
	stered office address on our records, enter the name of the
new registered agent and/or the new registered of	fice address here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	City Zip Code

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 genera	l partner(s),	enter the	name and	business	address	of each	general	partner	being
ade	ded or removed from our	records:								

<u>Title</u>	<u>Name</u>	Address	Type of Action		
<u>GP</u>	Gordon R. Lohman , deceased	7648 A1A South St. Augustine, FL 32080	_ Add _ Remove _ Decease		
<u>GP</u>	Jo Ann Lohman deceased	7648 A1A South St. Augustine, FL 32080	Add Remove _ Decease		
<u>GP</u>	Karin N. Lohman	2732 Woodley Place NW Washington, DC 20008	Add Remove		
					
			Add 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."					

(NOTE: If adding or removing" limited liability limited partnership" status, all general partners must sign this amendment.)

This Limited Partnership hereby removes its "Limited Liability Limited Partnership" status.

F. If amending any other information, e	enter change(s) here	e: (Attach additional sheets, if necessary.)
Effective date, if other than the date of filin (Effective date cannot be prior to nor more than 90 of State.)	g: days after the date this	s document is filed by the Florida Department of
Signature(s) of a general partner or all ge	eneral partners*:	
(*NOTE: Only one current general partner is requiremoving a "limited liability limited partnership" elewhen adding or removing a "limited liability limited	ection statement. Cha	pter 620, F.S., requires all general partners to sign
Kan Z. Leh P.R.		
		
Signature(s) of all new or dissociating gen	<u>neral partner(s), i</u>	<u>if any</u> :
Kanz Lh		
Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75		