# A07000001211

(Re	equestor's Name)	
(Address)		
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
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SECRETARY OF STATE
DIVISION OF CORPORATIONS

32-3014

#### COVER LETTER

TO:

TO: Registration Section Division of Corporations	
SUBJECT: Puthuff Far	Partnership or Limited Liability Limited Partnership)
The enclosed Certificate of Conversion, Cersubmitted to convert an "Other Organization Limited Liability Limited Partnership in acc	n" into a Florida Limited Partnership or
Please return all correspondence concerning  Edgar R Put	huff
Puthuff Family Lin	ited Partnership
15440 Fiddlesticf	
Ft. Myers FL 3: (City, State and Zip Code)	3912
For further information concerning this matt	ter, please call:
Edgar Puthuff (Name of Contact Person)	
Enclosed is a check for the following amoun	(Area Code and Daytime Telephone Number) at:
□ \$1,052.50 Filing Fees □ \$1,061.25 Filing Fees (\$52.50 for Conversion and \$1,000 - Certificate) Status	□ \$1,105.00 Filing Fees and Certified Copy  Status  Status  Status
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



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

October 18, 2007

EDGAR R PUTHUSS 15440 FIDDLESTICKS BLVD FT MYERS, FL 33912

SUBJECT: PUTHUFF FAMILY LIMITED PARTNERSHIP

Ref. Number: W07000051746

We have received your document for PUTHUFF FAMILY LIMITED PARTNERSHIP and your check(s) totaling \$1113.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

The name of your limited liability limited partnership must contain an acceptable suffix. Acceptable limited liability limited partnership suffixes include: Limited Liability Limited Partnership, L.L.L.P., or LLLP.

Please return the corrected original and one copy of 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) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 907A00061427

Oct. 24, 2007

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

#### Dear Tammy:

I have changed the request from a Limited Liability Limited Partnership to a regular Limited Partnership. And according to our phone discussion the Limited Partnership does not require a LLLP or L.L.L.P..

If you need to contact me, please call 239-7680635. Normally I am not available in the morning, but am available after 1:30 PM.

Thank you for your help on the phone.

Yours truly

Edgar Puthuff

**General Partner** 

**Puthuff Family Limited Partnership** 

#### **Certificate of Conversion**

For

#### "Other Business Organization"

Into

#### Florida Limited Partnership or Limited Liability Limited Partnership

This Certificate of Conversion and attached Certificate of Limited Partnership are submitted to convert the following "Other Business Entity" into a Florida Limited Partnership or Limited Liability Limited Partnership in accordance with s.620.2104, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this
Certificate of Conversion is:
Pythuff Family Limited Partnership (Enter Name of Other Business Entity)
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
(Enter entity type. Example: corporation, limited liability company, sole proprietorship, general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws of Michigan  (Enter state, or if a non-U.S. entity, the name of the country)
on Jan. 4 2005  (Enter date "Other Business Entity" was first organized, formed or incorporated)
(Enter date "Other Business Entity" was first organized, formed or incorporated)
3. The name of the Florida Limited Partnership or Limited Liability Limited Partnership as set forth in the attached Certificate of Limited Partnership:
Puthuff Family Limited Partnership
Enter Name of Florida Limited Partnership or Limited Liability Limited
Partnership)

4. The conversion was approved as required by Chapter 62 such a manner that complied with the converting organizat	• • • •
5. If not effective on the date of filing, enter the effective of (The effective date: 1) cannot be prior to nor more that document is filed by the Florida Department of State; At the effective date listed in the attached Certificate of Lieffective date is listed therein.)	n 90 days after the date this AND 2) must be the same as
Signed thisday of _Oct.	20 <b>0 7</b>
Signature of Each General Partner Listed in Attached Certification of Edgard Listed in Attached Certification (Control of Control of Certification (Control of Certification (Certification (Certificatio	ficate of Limited Partnership:
Fees:	
Certificate of Conversion: Fees for Florida Certificate of Limited Partnership: (\$965 Filing Fee and \$35 Filing Fee)	\$ 52.50 \$1,000.00
Certificate of Status:	\$ 52.50 (Optional) \$ 8.75 (Optional)

## CERTIFICATE OF LIMITED PARTNERSHIP FOR FLORIDA LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

### Puthuff Family Limited Partnership

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include 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.P. or LLLP.

2 15440 Fiddlesticks Blvd.		
FT. Myers, FL 33912		
3. Edgar R. Puthuff (Name of Registered Agent for Scrvice of Process)		
4. 15440 Fiddlesticks Blvd		
FT. Myers, FL 33912	•	
5. 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 an accept the obligations of my position as registered agent.	07 0CT 25 P	SECRETARY OF COR
6. 15440 Fiddlesticks Blvd.	H 2:	PORATIO
Ft. Myers, FL 33912	ഗ	SNC

8. Name and business address of en Name:  Edgar R. PuThu	ach general partner:  Business Address:  15440 Fiddlesticks Blvd  Ft. Myers, FL 33912
	·
9. Effective date, if other than the date of  (Effective date cannot be prior to n	filing: or more than 90 days after the date the document is
filed by the Florida Department of	
Signature of each general partner:	
Filing Fees: Certified Copy (optional): Certificate of Status (optional):	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) \$ 52.50 \$ 8.75

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