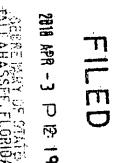
A07000001414

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	****



900311430519

04/03/18--01015--015 **52.50



Office Use Only

COVER LETTER

STREET ADDRE	SS:	MAILING	ADDRESS:	
⅓ \$52.50 Filing Fee	☐\$61.25 Filing Fee and Certificate of Status	☐\$105.00 Filing Fee and Certified Copy	☐\$113.75 Filing Fee, Certified Copy, and Certificate of Status	
Enclosed is a check	for the following amo	unt:		
Name of Cont	act Person	Area Code and Day	time Telephone Number	
NANCY B CROW		<u>at (772)283-2</u>		
For further informa	tion concerning this ma	atter, please call:		
E-man address; (t	o de used for future annuar	report normeation)		
YSIHLER@CR	ICPA.COM o be used for future annual		💆 🙃	
	•		D B. 1	
	City, State and Zip Code			Į
STIIA	RT, FL 34994		• • •	
	Address		SSE	1
33 SW)	FLAGLER AVE		AR 3	47
	Firm/Company		25 25 26 26 26 26 26 26 26 26 26 26 26 26 26	ښ
			₩. ~	
	Contact Person			
NANCY B CR	OWDER-MCCOY			
Please return all con	respondence concerning	ig this matter to:		
D1411		th:		
The enclosed Certif	icate of Amendment a	nd fee(s) are submitted	for filing.	
N	ame of Florida Limited Par	tnership or Limited Liabilit	y Limited Partnership	
SUBJECT: JGT H	IOLDINGS LIMITE	D PARTNERSHIP		
Division of	Corporations			
TO: Registration	Section			

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

Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

JGT HOLDINGS LIMITED PARTNERSHIP	
Insert name currently on fil	le with Florida Department of State
Pursuant to the provisions of section 620.1202, Flimited liability limited partnership, whose certificate of amendment to	cate was filed with the Florida Department of State on rida document numberA07000001414,
This amendment is submitted to amend the following:	
	imited partnership or limited liability limited partnership
<u>here</u> :	Electric and the second
New name must be distinguish	able and contain an acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Partnersh Acceptable Limited Liability Limited Partnership suffixes: I	
B. If amending mailing address and/or principal office address here:	pal office address, enter new mailing address and/or
New Principal Office Address: (Must be STREET address)	33 SW FLAGLER AVE STUART, FL 34994
New Mailing Address: (May be post office box)	33 SW FLAGLER AVE STUART, FL 34994
C. If amending the registered agent and/or registenew registered agent and/or the new registered office	ered office address on our records, enter the name of the e 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 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>	<u>Address</u>	Type of Action
<u>GP</u>	FIELDING L WILSON JR	5 ST LUCIE COURT STUART, FL 34996	□ Add □ Remove
<u>GP</u>	JEFFERSON R WILSON	140 EAST LAKE DRIVE ANNAPOLIS, MD 21403	— AND Addity T
			Add ^D 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."
 - 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.)

F. If amending any other informa	tion, enter change(s) here: (Attach addition	nal sheets, if nece	essary.)
				=
Tree of the following state of the first	C C1'			
Effective date, if other than the date of (Effective date cannot be prior to nor more th	t filing: an 90 days after the a	late this document is filed b	by the Florida Dep	partment of
State.) Note: If the date inserted in this block does no	ot meet the applicable	statutory filing requiremen	nts, this date will r	ot
be listed as the document's effective date on t	he Department of Sta	te's records.		
Signature(s) of a general partner or	all general partn	ers*:		
(*NOTE: Only one current general partner is	s required to sign this	document unless the limite	ed parinership is a	dding or
removing a "limited liability limited partnersh when adding or removing a "limited liability			A	thers to sign
		110 7	100 m	
JEFFERSON R WILSON	 -	Jeff 200		
			\$5.5 79	<u> </u>
			7	
				· -
				
Signature(s) of all new or dissociation	ng general partno	er(s), if any:		
FIFT DING I WIT CON ID		DECEASED		
FIELDING L WILSON JR		DECEASED		
				
Filing Fee: \$5	52.50			
	52.50 58.75			