

# A08000000561

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : CORPDIRECT AGENTS, INC.  
Account Number : 110450000714  
Phone : (850) 222-1173  
Fax Number : (850) 224-1640

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**LP/LLP AMENDMENT/RESTATEMENT/CORRECTION  
PHILIP & LOUISE WANG FAMILY LIMITED PARTNERSHIP**

Certificate of Status	0
Certified Copy	1
Page Count	07
Estimated Charge	\$105.00

RECEIVED

12 MAR -5 AM 11:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**B. KOHR**

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Corporate Filing Menu 6 2012

Help

**EXAMINER**

03/05/2012 10:01

(FAX)

P.002/007

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FILED STATE  
DIVISION OF CORPORATIONS  
12 MAR -5 PM 12:34

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Philip & Louise Wang Family Limited Partnership  
Name of Florida Limited Partnership or Limited Liability Limited Partnership

The enclosed Certificate of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Jacob Wang

Contact Person

Phillip & Louise Wang Family Limited Partnership

Firm/Company

730 18th Avenue

Address

San Francisco, CA 94121

City, State and Zip Code

jslwang@msn.com

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

For further information concerning this matter, please call:

Jacob Wang

Name of Contact Person

at ( 415 )

387-5276

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$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

**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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**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>	<u>Type of Action</u>
_____	Phillip Wang	(new address only) 3253 Catherine Street Honolulu, HI 96815	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	Louise Wang	(deceased) 250 Kawaiahae St. 10B Honolulu, HI 96825	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
_____	Jacob Wang	730 18th Avenue San Francisco, CA 94121	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
_____	Henry Wang	4188 Farrell Place Santa Clara, CA 95054	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
_____	Livia Wang	3253 Catherine Street Honolulu, HI 96815	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> 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.)**

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F. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Effective date, if other than the date of filing: \_\_\_\_\_

*(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)*

Signature(s) of a general partner or all general partners\*:

(\*NOTE: Only one current general partner is required to sign this document unless the limited partnership is adding or removing a "limited liability limited partnership" election statement. Chapter 620, F.S., requires all general partners to sign when adding or removing a "limited liability limited partnership" election statement.)

Philip Wang

*Philip Wang*

Signature(s) of all new or dissociating general partner(s), if any:

Louise Wang - Deceased

Not applicable - Deceased

Jacob Wang

Henry Wang

Livia Wang

*[Signature]*

Filing Fee: \$52.50  
Certified Copy (optional): \$52.50  
Certificate of Status (optional): \$8.75

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F. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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Philip Wang

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Louise Wang - Deceased

Not applicable - Deceased

Jacob Wang

Henry Wang

Livia Wang

Filing Fee: \$52.50  
Certified Copy (optional): \$52.50  
Certificate of Status (optional): \$8.75

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P. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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Philip Wang

*Philip Wang*

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Louise Wang - Deceased

Not applicable - Deceased

Jacob Wang

Henry Wang

Livia Wang

*Henry Wang*

Filing Fee: \$52.50  
Certified Copy (optional): \$52.50  
Certificate of Status (optional): \$8.75

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