A080000000597

(Requestor's Name)
(Address)
(,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Document Number)
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SECRETARY OF STATE

T. HAMPTON

STEVEN J. SANDUSKY

ATTORNEY AT LAW

20 North CLARK STREET - SUITE 1725

Chicago, Illinois 60602

(312) 263-4740

stevensanduskylaw@gmail.com

October 30, 2014

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

Re: S&J Ray Limited Partnership

#A0800000597

Dear Sir or Madam,

Enclosed is your Form Certificate of Amendment to the above limited partnership. Please acknowledge receipt and send me a copy of the Certificate of Status, the payment for which is included in my check. My check for \$61.25 is enclosed for the filing fee and the Certificate of Status. Please communicate with the undersigned if anything additional is required.

Cordia**∦**ly

Steven Sandusky

SJS/vc.

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

	/ Limited Partnership
Insert name currently or	on file with Florida Department of State
limited liability limited partnership, whose cer June 11, 2008 assigned l	2. Florida Statutes, this Florida limited partnership or entificate was filed with the Florida Department of State on Florida document number A0800000597
adopts the following certificate of amendment	t to its certificate of limited partnership.
This amendment is submitted to amend the following	ing:
A. If amending name, <u>enter the new name of the here:</u>	the limited partnership or limited liability limited partnersh
New name must be disting	guishable and contain an acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Partne Acceptable Limited Liability Limited Partnership suffixe	nership, Limited, L.P., LP, or Ltd. xes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.
B. If amending mailing address and/or principal office address here:	incipal office address, enter new mailing address and/o
New Principal Office Address: (Must be STREET address)	SECRET AH
New Mailing Address: (May be post office box)	SSEE TO TO
C. If amonding the registered agent and/or reco	gistered office address on our records, enter the name of the
new registered agent and/or the new registered of	
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.

HC Changing Registered	LAnent Signature	e of New Registered Agent
II Changing registered	i rigana <u>orgnatut</u>	COLINGW INCIDIATION AREUN

D.	If amending th	e general	partner(s),	enter th	e name	and	business	address	of eac	h general	partner	being
ade	ded or removed :	from our	records:									

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>GP</u>	Burton Ray	Israel	Add Remove
			Add Remove
			NOV PH CARACTER PH - FE
			- Banove
			_ 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."
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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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			<u></u>				
							
Effective date, if other than the da (Effective date cannot be prior to nor mo State.)	ite of filing: ore than 90 days a	fier the date	this docume:	nt is filed by	the Florida	Depart	ment of
Signature(s) of a general partne	r or all genera	ıl partner	· <u>s*:</u>				
(*NOTE: Only one current general part removing a "limited liability limited part when adding or removing a "limited liab	tnership" election	statement.	Chapter 620,	F.S., require			
X alang Ray							
Alan Ray		•	*****				
		•				,	
		-					
	_						
Signature(s) of all new or dissoc	iating general	nartnerf	s) if any:				
SIGNATURE OF GISSOC	iating general	mar chiery.	<u> </u>				
Burton A. Ray							
Burton Ray		-					
		-		······································			
		-					
					TAL SEC	141	
		_			AC	NO	11
Filing Fee:	\$52.50				ARY ASSI	19	-
Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$8.75				EE.F	PM	
ceruncate or status (optional):	\$8.75				HOL VIS		C
					A A	<u>ئ</u>	