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K. SALY EXAMINER

APR -1

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Canf	or 2007 Group LLLP
	rtnership or Limited Liability Limited Partnership
The enclosed Certificate of Amendment a	and fee(s) are submitted for filing.
Please return all correspondence concerni	ing this matter to:
Mark Koivu	
Contact Person	
Firm/Company	
5393 Shoreline Circle	e
Address	
Sanford, Florida 3277	1
City, State and Zip Code	·
Canflorgeneral@aol.co	
E-mail address: (to be used for future annual	report notification)
For further information concerning this m	atter, please call:
Mark Koivu	at (407) 3301474
Name of Contact Person	Area Code and Daytime Telephone Number
Enclosed is a check for the following amo	ount:
\$52.50 Filing Fee Status \$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 Clifton Building	Division of Corporations P. O. Box 6327
2661 Executive Center Circle	Tallahassee, FL 32314
Tallahassee, FL 32301	· momentum of it was it

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP **OF**



Canflor 2007 Group LLLP

Insert name currently on file with Florida Department of State

This amendment is submitted to amend t	the following:
A. If amending name, enter the new here:	name of the limited partnership or limited liability limited
New name mu	ist be distinguishable and contain an acceptable suffix.
Acceptable Limited Partnership suffixes: Li	imited Partnership, Limited, L.P., LP, or Ltd. vership suffixes: Limited Liability Limited Partnership, L.L.L.P. or L
(Must be STREET address New Mailing Address (May be post office box)	
C. If amending the registered agent	and/or registered office address on our records, enter the
new registered agent and/or the new r	registered office address nere:

EILED 2016 MAR 25 PM 3: 05

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 act on the 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

tt tunioa	<u>Name</u>	Address	Type of Action
16000 <u>09188</u> 1	Canflor 2007 Manager, U	∠ 5393 Shoreline Circle Sanford FL 32771	Add Remove
1400000 9296	C & G Partners LLC	5393 Shoreline Circle Sanford FL 32771	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
	partnership or limited liabilit ip" status, enter change here:	y limited partnership is ame	nding its "limited liabi
This Limite	d Partnership hereby elects to be	e a "Limited Liability Limited l	Partnership."

	2016.
	2016 HAR 25 P
	277.30
	ARASSI OF
Effective date, if other than the date of filing:	
	after the date this document is filed by the Florida Department of
State.)	
Signature(s) of a general partner or all genera	al partners*:
	sign this document unless the limited partnership is adding or a statement. Chapter 620, F.S., requires all general partners to sign nership" election statement.)
NEW GENIAR PARTNER	DISSOCIATING GENERAL PARTNER
C96 Partners LLC	CANFLOR 2007 MANAGER, LLC
4	
BY: MARK KOILL MANAGER	BY! MARKKOING MANAGLA
	7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7
Signature(s) of all new or dissociating general	I partner(s), if any:
	\sim
	-
	
Filing Fee: \$52.50	
Certified Copy (optional): \$52.50	
Certificate of Status (optional): \$8.75	