A0900000134

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



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09/13/16--01011--006 **35.00



S Warren 0CT 28 2016



September 14, 2016

BRETT MOORE 218 TENACITY LANE SIESTA KEY, FL 34242

SUBJECT: TENACITY LIMITED PARTNERSHIP

Ref. Number: A09000000734

We have received your document for TENACITY LIMITED PARTNERSHIP and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION - INC, but your entity is a LIMITED PARTNERSHIP - LP. Please complete and return the enclosed blank form(s).

Please return 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) 245-6051.

Letter Number: 016A00019679

Stacey M Warren Regulatory Specialist II

www.sunbiz.org

COVER LETTER

	•	•		
то:	Registration Section Division of Corporations			
SUBJ	ECT: Tenacity Limited To Name of Limited Partnership or Lim	Partnership		
2020	Name of Limited Partnership or Lim	ited Liability Limited Partnership		
DOC	ument number: <u>A 090000</u> 0	734		
	nclosed Statement of Change of Registered (are submitted for filing.	Office and/or Registered Ago	ent and	
Please	return all correspondence concerning this n	natter to:		
B	contact Person Contact Person Enacity Limited Party Firm/Company			
	Contact Person			
TE	enacity Limited Party	iership	_ ,	_ •
	Firm/Company	, , _ , _	A SE	20
219	K Tenacity Lane Address		LAN	1016 OCT 27 AT 11: 4
	Address		AS	7
<i>(</i> ;	2010 Van El 20104	2	13S	
<u>ال</u>	esta Key, FL 3424.			3
			0.13	-
<u>er</u>	ooo ma yahoo, Com mail address: (to be used for future annual report no	tification)	80.7	
For fu	rther information concerning this matter, ple	ease call:		
Ba	and the	847,971-65	00	
	2++ Moore at (at (rea Code and Daytime Telephone	Number	
Englo	sed is a \$35.00 check made payable to the F	orida Department of State		
Encio	sed is a \$33.00 check made payable to the r	jorida Department of State.		
STRE	TREET ADDRESS: MAILING ADDRESS:			
_	tration Section	<u> </u>		
	Division of Corporations Division of Corporations			
	n Building	P. O. Box 6327		
266 L	Executive Center Circle	Tallahassee, FL 32314		

INHS04 (01/06)

Tallahassee, FL 32301

(1)

LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

change its registered office or registered agent, or both, in the state of Florida.			
1. Tenacity Limited Partnership			
Name of Limited Partnership or Limited Liability Limited Partnership			
2. 10/22/2009 3. A0900000734			
Date of filing/registration in Florida Florida document number			
4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:			
Co as No Co to C			
Corporation Service Company			
Name			
1201 Hays Street Address Tallahassee, FL 32301-2525			
Address			
Tallahassee, FL 32301-2525			
City, State and Zip			
5. The name and Florida street address of the new registered agent and/or office:			
R-all Marco			
Brett Moore			
218 Tenacity Lane Florida street address (P.O. Box not acceptable)			
Florida street address (P.O. Box not acceptable)			
Siesta Rey FL 34242 City, State and Zip			
City State and Zin			
City, State and Zip			
6. Such change(s) is/are effective when filed by the Florida Department of State.			
1 At Man ()			
1 100 100 le (n.).			
Signature of General Partner			
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 familiar with an accept the obligations of my position as registered agent.			
/ Yutt More 3 = -			
Signature of Registered Agent			
`` 			
SSE 27			
Filing Fee: \$35.00			
Certified Copy (optional): \$52.50			
ORAL LA			