

A10000000441

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TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** The Jeremiah and Kristin Joseph Family Limited Partnership  
Name of Limited Partnership or Limited Liability Limited Partnership

**DOCUMENT NUMBER:** A10000000441

The enclosed Statement of Change of Registered Office and/or Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

David A. Holmes, Esquire

Contact Person

Farr Law Firm

Firm/Company

99 Nesbit Street

Address

Punta Gorda, FL 33950

City, State and Zip Code

dholmes@farr.com

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

For further information concerning this matter, please call:

Barbara Lockhart

Name of Contact Person

at ( 941 ) 6391158 ext. 275

Area Code and Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Florida Department of State.

**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

**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.

1. The Jeremiah and Kristin Joseph Family Limited Partnership, LLLP  
Name of Limited Partnership or Limited Liability Limited Partnership

2. 8/11/2010  
Date of filing/registration in Florida

3. A1000000441  
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:

David A. Holmes, Esquire  
Name

99 Nesbit Street  
Address,

Punta Gorda, FL 33950  
City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

Kristin Joseph  
Name

1811 Englewood Road, #277  
Florida street address (P.O. Box not acceptable)

Punta Gorda FL 33950  
City, State and Zip

6. (Such change(s) is/are effective when filed by the Florida Department of State.

[Signature]  
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 I am familiar with and accept the obligations of my position as registered agent.*

[Signature]  
Signature of Registered Agent

Filing Fee: \$35.00  
Certified Copy (optional): \$52.50

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