## A100000006131

(Requestor's Name)				
(Address)				
(Add	dress)			
(City	//State/Zip/Phone	#)		
PłCK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nam	ne)		
(Do	cument Number)			
Certified Copies	_ Certificates	of Status		
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SECRETARY OF STATE AND ANIASSEE FLORIDA

N. Cuffigury JUN 1 7 20121

## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: DIL Blackburn Family LUP			
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:			
Tanya Garcia Vega, Esq.  Contact Person  Panck Beskin: Garcia Vega, P.A.  Firm/Company			
COOD Coupen Rd. Suite 204 Address			
miami Lakes, Fl 33014  City, State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Tanya bawi a Vega at (305) 550 - 5209  Name of Contact Person Area Code and Daytime Telephone Number			
Them of Committee and Say white temperature			
Enclosed is a check for the following amount:			
\$52.50 Filing Fee and Certificate of Status \$105.00 Filing Fee and Certified Copy Certificate of Status \$105.00 Filing Fee 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			



May 9, 2013

TANYA GARCIA VEGA, ESQ. RANCK BESKIN & GARCIA VEGA, P.A. 6500 COWPEN ROAD, SUITE 204 MIAMI LAKES, FL 33014

SUBJECT: D & L BLACKBURN FAMILY LLLP

Ref. Number: A10000000631

We have received your document for D & L BLACKBURN FAMILY LLLP and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the dissociating general partner unless the document states the general partner is deceased or a guardian or general conservator has been appointed or the general partner previously filed a Statement of Dissociation with the Florida Department of State.

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.

Neysa Culligan Regulatory Specialist II

Letter Number: 913A00011568

FILED 2013 JUN 17 PH 2: 48

## CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Dil Backburn	Family	ULP
Insert name currently on file	with Florida Department of	of State
Pursuant to the provisions of section 620.1202, Flo limited liability limited partnership, whose certific 10 14 20 0 , assigned Flor adopts the following certificate of amendment to it	ate was filed with the lida document number	Florida Department of State on A10000013,
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the line	nited partnership or lin	nited liability limited partnership
New name must be distinguisha	ble and contain an acceptal	ole suffix.
Acceptable Limited Partnership suffixes: Limited Partnership Acceptable Limited Liability Limited Partnership suffixes: L		
B. If amending mailing address and/or princip principal office address here:	al office address, <u>ente</u>	r new mailing address and/or
New Principal Office Address: (Must be STREET address)		·
New Mailing Address: (May be post office box)		
C. If amending the registered agent and/or register new registered agent and/or the new registered office		ır records, <u>enter the name of the</u>
Name of New Registered Agent:		<u> </u>
New Registered Office Address:	Enter Florida sti	reet 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.

If Changing I	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>	Address	Type of Action
G	Donald Blackburn	8100 SW 142 Terrain Palmetto Bay, FL331	Add Remove
6	Christine E. Blackburn	6144 S.W. Paradis PT. Dive Palmetto Bay, FL	Add Remove
		33/57	Add Remove
<del></del>			Add Remove
<del></del>	<del></del>		Add Remove
			Add Remove
	partnership or limited liability p" status, enter change here:	limited partnership is amend	ing its "limited liability
This Limited	Partnership hereby elects to be	a "Limited Liability Limited Par	tnership."
This Limited	Partnership hereby removes its	"Limited Liability Limited Part	nership" status.

(NOTE: If adding or removing" limited liability limited partnership" status, all general partners must sign this amendment.)

Effective date, if other than the date of filing:	r the date this document is filed by the Florida Department of
(Effective date cannot be prior to nor more than 90 days after State.)	r the date this document is filed by the Florida Department of
Signature(s) of a general partner or all general p	
(*NOTE: Only one current general partner is required to sig removing a "limited liability limited partnership" election sta when adding or removing a "limited liability limited partners	tement. Chapter 620, F.S., requires all general partners to sign
Libur Really	SEC:
- Office water	AHASA -
	THO P
	ETAT LOR
Signature(s) of all new or dissociating general page	artner(s), if any:
Donald Black burn of	eccasta 2/11/2013
Christie Backse	6/5/2013
Filing Fee: \$52.50	
Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	