

# **2012 LIMITED PARTNERSHIP REINSTATEMENT**

DOCUMENT# A11000000093

**FILED**  
**Nov 07, 2012**  
**Secretary of State**

**Entity Name:** GRECO-MCCLINTOCK, LLLP

**Current Principal Place of Business:**

3435 BAYSHORE BLVD., UNIT 1800 NORTH  
TAMPA, FL 33629

**New Principal Place of Business:**

**Current Mailing Address:**

3435 BAYSHORE BLVD., UNIT 1800 NORTH  
TAMPA, FL 33629

**New Mailing Address:**

**FEI Number:** 46-1250703

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GRECO, DICK A  
3435 BAYSHORE BLVD., UNIT 1800 NORTH  
TAMPA, FL 33629 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**GENERAL PARTNER INFORMATION:**

Document #:

Name: GRECO, DICK A  
Address: 3435 BAYSHORE BLVD., UNIT 1800 NORTH  
City-St-Zip: TAMPA, FL 33629

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Document #:

Name: MCCLINTOCK GRECO, LINDA  
Address: 3435 BAYSHORE BLVD., UNIT 1800 NORTH  
City-St-Zip: TAMPA, FL 33629

Address:  
City-St-Zip:

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

**SIGNATURE:** LINDA MCCLINTOCK GRECO

GP

11/07/2012

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date