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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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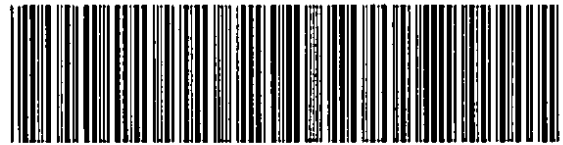
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FILED
2022 MAR 28 PM 12 20
CLERK OF COURT
JAN 10 2022

A. RAMSEY

APR 12 2022



Laurence I. Blair, Partner
One Boca Place
2255 Glades Road, Suite 400-E
Boca Raton, Florida 33431
Phone: 561.994.2212
Fax: 561.997.8494
Direct Phone: 561.322.2964
Direct Fax: 561.322.2965
Email: larry.blair@gmlaw.com

March 25, 2022

Via FedEx

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Re: M. C. CORNELL LIMITED PARTNERSHIP

Dear Gentlemen:

Enclosing please find a cover letter, Certificate of Amendment and our firm's check number 33956 payable to the Florida Department of State in the amount of \$52.50. Please make the requested changes at your earliest convenience.

If you have any questions, please feel free to contact me.

Sincerely yours,

GREENSPOON MARDER LLP

Laurence I. Blair, Partner
LIB/jkw/Enc.

cc: Mrs. Jane Cornell (via email w/o enc.)
Mr. Michael Cornell (via email w/o enc.)

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: M. C. Cornell Limited Partnership

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:

LAURENCE I. BLAIR, ESQ.

Contact Person

GREENSPOON MARDER LLP

Firm/Company

2255 Glades Road, Suite 400E

Address

BOCA RATON, FL 33431

City, State and Zip Code

larry.blair@gmlaw.com

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

For further information concerning this matter, please call:

LAURENCE I. BLAIR, ESQ.

at (561) 994-2212 ext. 1701

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$52.50 Filing Fee

☐ \$61.25 Filing Fee
and Certificate of
Status

☐ \$105.00 Filing Fee
and Certified Copy

☐ \$113.75 Filing Fee,
Certified Copy, and
Certificate of Status

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

FILED

CERTIFICATE OF AMENDMENT
TO
CERTIFICATE OF LIMITED PARTNERSHIP
OF

2022 MAR 28 PM 12:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M. C. Cornell Limited Partnership

Insert name currently on file with Florida Department of State

Pursuant to the provisions of section 620.1202, Florida Statutes, this Florida limited partnership or limited liability limited partnership, whose certificate was filed with the Florida Department of State on July 26, 2011, assigned Florida document number A11000000560, adopts the following certificate of amendment to its certificate of limited partnership.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited partnership or limited liability limited partnership here:

New name must be distinguishable and contain an acceptable suffix.

Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.

Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.

B. If amending mailing address and/or principal office address, enter new mailing address and/or principal office address here:

New Principal Office Address:

(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 name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

LAURENCE I. BLAIR, ESQ. c/o GREENSPOON MARDER

New Registered Office Address:

2255 Glades Road, Suite 400E

Enter Florida street address

BOCA RATON

City

, Florida 33431

Zip Code

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 Registered Agent, Signature of New Registered Agent

Title	Name	Address	Type of Action
GP	JONATHAN J. DANIEL, TRU	17640 LAKE ESTATES DRIVE BOCA RATON, FL 33496	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

☐ This Limited Partnership hereby elects to be a "Limited Liability Limited Partnership."

☐ This Limited Partnership hereby removes its "Limited Liability Limited Partnership" status.

Page 2 of 3

F. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Effective date, if other than the date of filing: _____
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Signature(s) of a general partner or all general partners*:

(*NOTE: Only one current general partner is required to sign this document unless the limited partnership is adding or removing a "limited liability limited partnership" election statement. Chapter 620, F.S., requires all general partners to sign when adding or removing a "limited liability limited partnership" election statement.)

	
_____	_____
_____	_____
_____	_____
_____	_____

Signature(s) of all new or dissociating general partner(s), if any:

_____	_____
_____	_____
_____	_____
_____	_____

Filing Fee: \$52.50
Certified Copy (optional): \$52.50
Certificate of Status (optional): \$8.75