

A11964

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

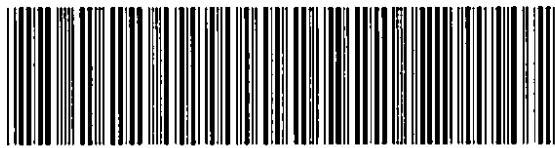
(Business Entity Name)

(Document Number)

ed Copies _____ Certificates of Status _____

cial Instructions to Filing Officer:

Office Use Only



300398240703

12/07/22--01001--020 44113.75

RECEIVED

FILED

2022 DEC -7 AM11:54
2022 DEC -7 PM12:32
S E C R E T A R Y O F S T A T E
T A L L A H A S S E E , F L O R I D A
T A L L A H A S S E E , F L

ef 12/7/2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: River Junction Apartments, LTD
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:

Michael K. McCormick

Contact Person

Firm/Company

512 South Bolivar Street

Address

Chattahoochee, Florida 32324

City, State and Zip Code

macker1666@yahoo.com

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

For further information concerning this matter, please call:

Michael K. McCormick _____ at (850) 899-0064
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

LAW OFFICE MIKE MCCORMICK
512 SOUTH BOLIVAR STREET
CHATTAHOOCHEE, FLORIDA 32324
Macker1666@yahoo.com
(850) 899-0064

December 6, 2022

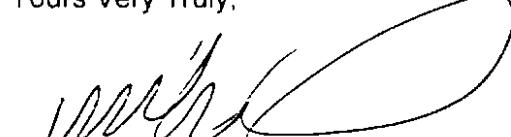
Division of Corporations

Re. River Junction Apartments, LTD

Dear Sir or Madam:

Please find amendment for immediate filing. Additionally, I have previously mailed amendment that is awaiting to be processed. Please cancel that order along with the check and file this amendment as I have been advised that the effective date of filing will be the date of hand delivery versus the mail que date. Please advise if any questions or if concerns. I am

Yours Very Truly,


Mike McCormick

FILED

CERTIFICATE OF AMENDMENT
TO
CERTIFICATE OF LIMITED PARTNERSHIP
OF

2022 DEC -7 PM 12:32

SECRETARY OF STATE
TALLAHASSEE, FL

River Junction Apartments, LTD

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 01/19/1982, assigned Florida document number A11964, 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:

Michael McCormick

New Registered Office Address:

512 South Bolivar Street

Enter Florida street address

Chattahoochee

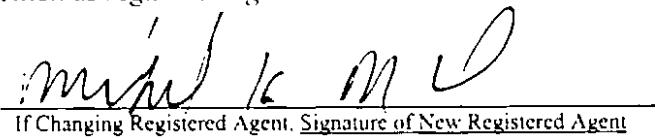
City

, Florida 32324

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 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>	<u>Address</u>	<u>Type of Action</u>
GP	Trelles D'Alemberte	406 East Georgia Street Tallahassee, Florida 32301	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
GP	Richard W. D'Alemberte	275 North Bolivar Street Chattahoochee, Florida 32324	<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

E. If the limited partnership or limited liability limited partnership is amending its "limited liability limited partnership" status, enter change here:

- This Limited Partnership hereby elects to be a "Limited Liability Limited Partnership."
- This Limited Partnership hereby removes its "Limited Liability Limited Partnership" status.

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

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

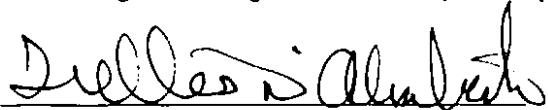
Effective date, if other than the date of filing:

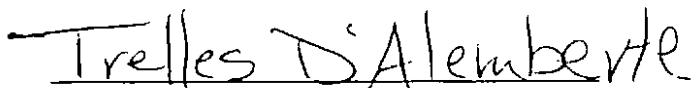
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

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.

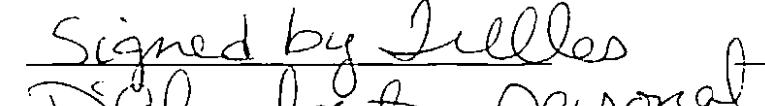
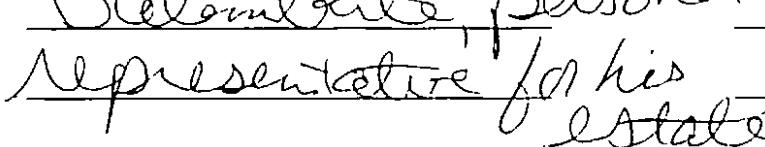
Signature(s) of a general partner or all general partners*:

(*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.)

Trelles D'Alemberte

Trelles D'Alemberte

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

Richard D'Alemberte deceased
Signed by Trelles D'Alemberte, personal
representative for his estate

Filing Fee: \$52.50

Certified Copy (optional): \$52.50

Certificate of Status (optional): \$8.75