

A12000000099

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

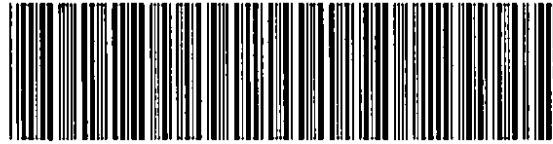
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2018 OCT 15 AM 10:19

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JOHN JOSEPH McHUGH, JR.
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VERO BEACH, FL 32961

October 8, 2018

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

RE: The Mary Lou Hammond LLLP

Gentlemen and Ladies:

I am enclosing an original Certificate of Amendment to Certificate of Limited Partnership for the above named limited partnership. In addition, a check in the amount of \$52.50 is enclosed which represents the filing fee for the amendment.

Please be advised that the General Partner, Mary Lou Hammond as Trustee of the Mary Lou Hammond Trust dated 01/24/2012 is deceased and the Successor Trustees, Suzanne Hammond and Thomas S. Hammond signed on the bottom portion.

Thank you for your cooperation in this matter.

Very truly yours,

John Joseph McHugh, Jr.
JJMc/dc
Enclosures as noted

**CERTIFICATE OF AMENDMENT
TO
CERTIFICATE OF LIMITED PARTNERSHIP
OF**

The MARY LOU HAMMOND LLLP

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 February 23, 2010, assigned Florida document number A12000000099, 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: 668 Ocean Road
(Must be *STREET* address) Vero Beach, FL 32963

New Mailing Address: 668 Ocean Road
(May be post office box) Vero Beach, FL 32963

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: _____

New Registered Office Address: _____

Enter Florida street 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 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>
<u>Trustee</u>	<u>Suzanne Hammond</u>	<u>668 Ocean Road</u> <u>Vero Beach, FL 32963</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>Trustee</u>	<u>Thomas S. Hammond</u>	<u>4683 Pebble Bay Circle</u> <u>Vero Beach, Florida 32963</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>Trustee</u>	<u>Mary Lou Hammond</u>	<u>855 Sand Fly Lane</u> <u>Vero Beach, FL 32963</u>	<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

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.)

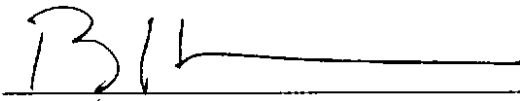
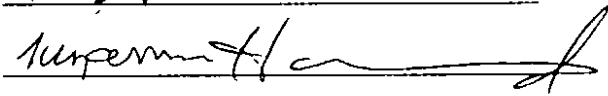
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.)

Current General Partner deceased.

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

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OCT 15 AM 8:09
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Filing Fee: \$52.50
Certified Copy (optional): \$52.50
Certificate of Status (optional): \$8.75