

A12000000510

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

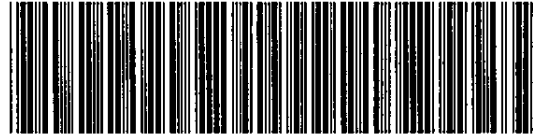
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAR - 6 2013

T. HAMPTON

50SEMBLER

YEARS Creating Retail Value.

Via Federal Express Ground
March 4, 2014

Registration Section
Florida Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**Re: Certificate of Amendment to Certificate of Limited Partnership
Park 66 Plaza, LLLP
Document #A12000000510**

Dear Sir or Madam:

Enclosed is the Certificate of Amendment to Certificate of Limited Partnership for the above-referenced limited liability limited partnership, along with our check #180061 for \$52.50 for the filing fee.

The purpose of this amendment is to change the general partner by removing Melvin F. Sembler, Trustee, and adding Betty S. Sembler, Trustee.

We respectfully request that this amendment be effective as of the date of filing.

Please return your letter acknowledging the filing of this amendment to my attention at the address shown below.

5858 Central Avenue
St. Petersburg, FL 33707-1728

If you have any questions, please do not hesitate to contact my office.

Sincerely,



Deann Lazzari Wojcicki
Chief Financial Officer

DLW/vim
K:DeannLtrs FLA DOS Park66PlzLLLP Amdmt - Change GP to BSS Trustee - 3-4-14

Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Park 66 Plaza, LLLP
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:

Deann Lazzari Wojcicki

Contact Person

The Sembler Company

Firm/Company

5858 Central Avenue

Address

St. Petersburg, FL 33707-1728

City, State and Zip Code

deann.lazzari-wojcicki@sembler.com

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

For further information concerning this matter, please call:

Deann Lazzari Wojcicki

Name of Contact Person

at (727) 384-6000, x3015

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

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

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

Park 66 Plaza, 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 Aug. 31, 2012, assigned Florida document number A12000000510, 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:

New Registered Office Address:

Enter Florida street address

_____, Florida

City

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TALLAHASSEE, FLORIDA

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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>Melvin F. Sembler</u> Trustee of the Melvin F Sembler Irrevocable Trust	<u>5858 Central Avenue</u> <u>St. Petersburg, FL 33707</u>	☐ Add ☒ Remove
_____	_____	_____	☐ Add ☐ Remove
<u>Trustee</u>	<u>Betty S. Sembler</u> Trustee of the Melvin F Sembler Irrevocable Trust	<u>5858 Central Avenue</u> <u>St. Petersburg, FL 33707</u>	☒ Add ☐ Remove ☐ Add ☐ Remove ☐ Add ☐ Remove ☐ Add ☐ Remove
_____	_____	_____	☐ Add ☐ Remove
_____	_____	_____	☐ Add ☐ Remove
_____	_____	_____	☐ Add ☐ Remove

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CLERK
STATE
OF
FLORIDA
ASSISTANT
CLERK

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

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.)

Betty S. Semblen

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

Betty S. Semblen

Mark S. Semblen

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

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TALLAHASSEE, FLORIDA