

A12671

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

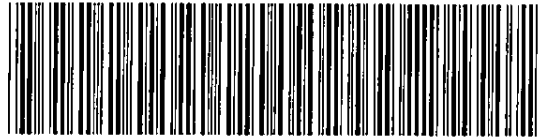
(Document Number)

Certified Copies _____

Certificates of Status _____

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LP Amend

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2024 APR 25 PM 2:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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2024 APR 25 AM 11:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A. RAMSEY

APR 30 2024

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

SILVER BEACH CLUB, A FLORIDA

LIMITED PARTNERSHIP

Please Debit FCA000000003 For: 113.75

Thank you Seth Neeley



____ Art of Inc. File _____
____ LTD Partnership File _____
____ Foreign Corp. File _____
____ L.C. File _____
____ Fictitious Name File _____
____ Trade/Service Mark _____
____ Merger File _____
____ Art. of Amend. File _____
____ RA Resignation _____
____ Dissolution / Withdrawal _____
____ Annual Report / Reinstatement _____
____ ☒ Cert. Copy _____
____ Photo Copy _____
____ Certificate of Good Standing _____
____ ☒ Certificate of Status _____
____ Certificate of Fictitious Name _____
____ Corp Record Search _____
____ Officer Search _____
____ Fictitious Search _____
____ Fictitious Owner Search _____
____ Vehicle Search _____
____ Driving Record _____
____ UCC 1 or 3 File _____
____ UCC 11 Search _____
____ UCC 11 Retrieval _____
____ Courier _____

Signature

Requested by:

Name _____ Date _____ Time _____

Walk-In _____ Will Pick Up _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SILVER BEACH CLUB, A FLORIDA 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:

CHERYLANNE HEY AHMED

Contact Person

Firm/Company

1025 S ATLANTIC AVENUE

Address

DAYTONA BEACH, FLORIDA, 32118

City, State and Zip Code

cherylahmed@ymail.com

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

For further information concerning this matter, please call:

CHERYLAHMED at (386) 295-7100
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
2024 APR 25 AM 11:18
CLERK OF STATE
JENNIFER D. DODD

CERTIFICATE OF AMENDMENT
TO
CERTIFICATE OF LIMITED PARTNERSHIP
OF

SILVER BEACH CLUB, A FLORIDA 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 JUNE 11, 1982, assigned Florida document number A12671, 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

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	SILVER BEACH CLUB, LTD, INC A FL CORP	1025 S ATLANTIC AVENUE DAYTONA BEACH, FL 32118	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
GP	W. ROBERT HEY	1025 S ATLANTIC AVENUE DAYTONA BEACH, FL 32118	<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: April 24, 2024

(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.)

SILVER BEACH CLUB, LTD, INC

a Florida corporation

By:

Cheryl Anne Hey Ahmed

By: Cheryl Anne Hey Ahmed, President

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

Estate of W. Robert Hey

By:

Cheryl Anne Hey Ahmed

By: Cheryl Anne Hey Ahmed,

as Personal Representative

Filing Fee: \$52.50

Certified Copy (optional): \$52.50

Certificate of Status (optional): \$8.75

BILL OF SALE

For Ten Dollars (\$10.00) and other good and valuable consideration, the receipt and sufficiency whereof is hereby acknowledged The Estate of W. Robert Hey, by Cheryl Anne Hey Ahmed, as Personal Representative, conveys to Silver Beach Club, LTD. Inc., a Florida corporation all of the estate right title and interest in all general partnership Units of Silver Beach Club, a Florida limited partnership.

IN WITNESS WHEREOF, the undersigned has caused this Bill of Sale to be executed this 25th day of April, 2024.

The Estate of W. Robert Hey

By: Cheryl Anne Hey Ahmed

By: CHERYL ANNE HEY AHMED, as Personal Representative

STATE OF FLORIDA

COUNTY OF VOLUSIA

I HEREBY CERTIFY that on this day, before me, in my physical presence, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgments, the foregoing instrument was acknowledged before me by Cheryl Anne Hey Ahmed, Personal Representative, of The Estate of W. Robert Hey, duly authorized, of, he/she is personally known to me or has produced FL Driver License as identification.

WITNESS my hand and official seal in the County and State last aforesaid this 25th day of April, 2024.

Francis C. Perez Notary Public

Francis C. Perez Print Name

