

A13 0000000023

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

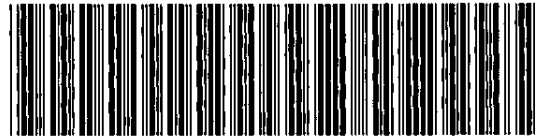
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA
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2013 FEB - 4 AM 9:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A13-23



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 432694 7913837

AUTHORIZATION

COST LIMIT \$ 61.25

[Signature]

ORDER DATE : November 26, 2012

ORDER TIME : 9:15 AM

ORDER NO. : 432694-011

CUSTOMER NO: 7913837

DOMESTIC AMENDMENT FILING

NAME: PALM HOUSE DEVELOPMENT LLLP

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 52956

EXAMINER'S INITIALS: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PALM HOUSE HOTEL LLLP
(Name of Limited Partnership or Limited Liability Limited Partnership)

The enclosed Statement of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

(Contact Person)

(Firm/Company)

(Address)

(City, State and Zip Code)

For further information concerning this matter, please call:

_____ at (_____) _____
(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

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

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TALLAHASSEE, FLORIDA

**STATEMENT OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED PARTNERSHIP
OR
LIMITED LIABILITY LIMITED PARTNERSHIP**

PALM HOUSE DEVELOPMENT LLLP

(Insert name currently on file with Florida Department of State)

Pursuant to the provisions of section 620.1207, Florida Statutes, this limited partnership or limited liability limited partnership submits the following certificate of correction.

FIRST: The reason for filing this certificate of correction is:

- ☒ The record contained false or erroneous information.
☐ The record was defectively signed.

SECOND: This statement corrects Certificate of Limited Liability Limited Partnership

(Specify document type being corrected)

filed with the Florida Department of State on 01/09/2013

(Insert date document filed with Dept. of State)

THIRD: The false or erroneous information or defect is as follows:
The name of the company is: Palm House Development LLLP

FOURTH: The false or erroneous information or defect is corrected as follows:
The name of the company is: Palm House Hotel LLLP

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

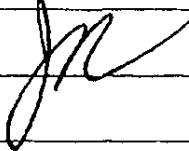
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Signature of a general partner*:

(*Note: If adding or deleting an election to be a limited liability limited partnership statement, all general partners must sign. If adding additional general partner(s), the new general partner(s) must sign).

Joseph Walsh



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

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

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