

A14000000007

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BLOOMGARDEN,
GOUDREAU
& ROSEN, P.A.

8551 West Sunrise Blvd., Suite 208 Ft. Lauderdale, FL 33322 T 954.370.2222 F 954.370.
PAUL M. BLOOMGARDEN • CHERRIE F. GOUDREAU • PHILIP C. ROSEN

March 11, 2014

Via Federal Express

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Pelican Via Palm, L.P. / Document No. A14000000077

Dear Sir or Madam:

Enclosed please find the Cover Letter and Certificate of Amendment to Certificate Limited Partnership of Pelican Via Palm, L.P. which is electing to be Pelican Via Palm, L.P. Please have this amendment filed as soon as possible. Also enclosed is our check in the amount of \$52.50 each to cover the filing fee.

Please return a filed copy in the overnight envelope provided.

Thank you very much for your assistance. Of course, if you need any additional information, please feel free to contact me.

Very truly yours,

A handwritten signature in cursive script, appearing to read "Victoria Bertrand", written in dark ink.

Victoria Bertrand
Corporate and Real Estate Paralegal

Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PELICAN VIA PALM, L.P.
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:

CHRISTINE MARCHAND

Contact Person

BLOOMGARDEN GOUDREAU & ROSEN, P.A.

Firm/Company

8551 W. SUNRISE BLVD., SUITE 208

Address

FT. LAUDERDALE, FL 33322

City, State and Zip Code

cmanze@comcast.net

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

For further information concerning this matter, please call:

CHRISTINE MARCHAND

Name of Contact Person

at (954)

370-2222

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

PELICAN VIA PALM, L.P.

Insert name currently on file with Florida Department of State

14 MAR
RECEIVED
TALLAHASSEE

Pursuant to the provisions of section 620.1202, Florida Statutes, this Florida limited partnership limited liability limited partnership, whose certificate was filed with the Florida Department of State on February 6, 2014, assigned Florida document number A140000000 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 here:

PELICAN VIA PALM, L.L.L.P.

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 LL

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 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. 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 added or removed from our records:

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|-------------|-------------------------|---|
| _____ | _____ | _____ _____ _____ | <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 |
| _____ | _____ | _____ _____ _____ | <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

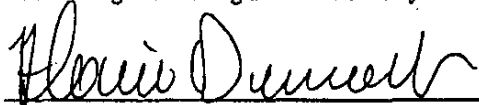
F. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

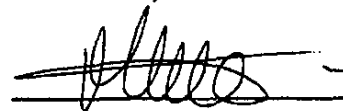
Effective date, if other than the date of filing: _____

(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department 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 when adding or removing a "limited liability limited partnership" election statement.)


Alain Dumont



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

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