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IBUYCARDBOARD.COM, LTD.

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105.00

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File Second *

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: IBUYCARDBOARD.COM, LTD.				
	tnership or Limited Liability Limited Partnership			
The enclosed Certificate of Amendment and fee(s) are submitted for filing.				
Please return all correspondence concerning	ng this matter to:			
Kevin Darnell				
Contact Person				
IBUYCARDBOARD.COM, LTD.				
Firm/Company				
5465 Vintage View Boulevard				
Address				
Lakeland, FL 33812				
City, State and Zip Code				
gkdarnell@gmail.com				
E-mail address: (to be used for future annual				
For further information concerning this ma	atter, please call:			
Patrick McKenzie	at (404) 504-7792			
Name of Contact Person	Area Code and Daytime Telephone Number			
Enclosed is a check for the following amo	unt:			
\$52.50 Filing Fee and Certificate of Status	X \$105.00 Filing Fee and Certified Copy Certified Copy, and Certificate of Status			
STREET ADDRESS:	MAILING ADDRESS:			
Registration Section Registration Section				
Division of Corporations	Division of Corporations			
Clifton Building 2661 Executive Center Circle	P. O. Box 6327 Tallahassee, FL 32314			
Tallahassee, FL 32301	rananassee, r.L. 32314			

2 /200 \$1323 \$20

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

14 JUL 22 AM 10: 46

SECRETARY OF STATE TALLAHASSEE FLORIDA

IBUYC	<u>ARDBO</u>	DARD.COM, L	.TD.	
Insert name curre	ently on file	with Florida Departs	nent of State	
Pursuant to the provisions of section 620 limited liability limited partnership, who May 15, 2014 assignment assignment.	se certific gned Flor	ate was filed with ida document nur	the Florida D nberA	epartment of State on 14000000261
This amendment is submitted to amend the fo	llowing:			
A. If amending name, enter the new name here:	e of the lin	mited partnership	or limited liabi	lity limited partnership
New name must be o	distinguisha	able and contain an ac	ceptable suffix.	
Acceptable Limited Partnership suffixes: Limited Acceptable Limited Liability Limited Partnership				.L.L.P. or LLLP.
B. If amending mailing address and/o principal office address here:	r princip	al office address	enter new m	ailing address and/or
New Principal Office Address) (Must be STREET address)	ess:		· · · · · · · · · · · · · · · · · · ·	
New Mailing Address: (May be post office box)				
C. If amending the registered agent and/onew registered agent and/or the new registered			on our records	, enter the name of the
Name of New Registered Agent:	Kevin	Darnell		
New Registered Office Address:	5465	Vintage View Bo		
			da street addres	
		Lakeland City	, Florida _	33812 Zip Code
		-·· <i>y</i>		

New Registered Agent's Signature, if changing Registered Agent:

		If Changing Registered Agent,	Signature of New Registered
	the general partner(s), <u>enter the red from our records</u> :	name and business address	of each general partne
<u> itle</u>	Name	Address	Type of Action
3	Stone House Investment	494 Wood Avenue Westmount, QC. H3Y	☐ Add 3JE 6 A Remove
<u>G</u>	Stone House Investment	5465 Vintage View Bo Lakeland, FL 33812	ouleverd
			Add P Repove
-			A HANDA AND AND AND AND AND AND AND AND AND
			DAdd
			Remove
	ed partnership or limited liability ship" status, enter change here:	limited partnership is a	mending its "limited i

(NOTE: If adding or removing" limited liability limited partnership" status, all general partners must sign this amendment.)

F. If amending any other information, enter cl	hunge(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 State.)	er the date this document is filed by the Florida Department of
Signature(s) of a general partner or all general	partners*:
(*NOTE: Only one current general partner is required to si removing a "limited liability limited partnership" election st when adding or removing a "limited liability limited partner	atement. Chapter 620, F.S., requires all general partners to sign
Stone House Investment Holdings of Florida, L.L. By: Jeun Warl	C.
Name: Kevin Darnell	
Title: Manager and President	
Signature(s) of all new or dissociating general p	partner(s), if any:
	· > .
	LEC
Filing Fee: \$52.50 Certified Copy (optional): \$52.50	HAS:
Certificate of Status (optional): \$8.75	Hog & M
	STA STA