A1400000346

(Re	equestor's Name)
(Ac	ddress)
(Ac	ddress)
(Ci	ty/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bı	usiness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
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DEPARTMENT OF STATE

2014 JUN 30 PN 1: 18
SECRETARY OF STATE
TALL AHASSEE, FLORIDA

COVER LETTER

[©] TO:	Registration Sec Division of Corp			
SUBJ			16120, Ltd.	
	Name o	of Florida Limited Par	tnership or Limited Liabilit	y Limited Partnership
The er	iclosed Certificate	of Amendment a	nd fee(s) are submitted	for filing.
Please	return all corresp	ondence concerni	ng this matter to:	
 		s M. Durant, Jr.		
	·	& Durant, P.L.	•	
		Firm/Company		
	1407 Pi	edmont Drive Ea	ast	
		Address		
	Tallahas	see, Florida 323	308	
	City,	State and Zip Code		
	jd(②boydlaw.net		
E-	mail address: (to be t	sed for future annual	report notification)	
For fu	rther information	concerning this ma	atter, please call:	
	James M. Di	urant, Jr.	_at (<u>850</u>)	386-2171
	Name of Contact Pe	erson	Area Code and Day	time Telephone Number
Enclos	sed is a check for t	he following amo	unt:	
\$52.	an	\$61.25 Filing Fee d Certificate of atus	\$105.00 Filing Fee and Certified Copy	\$113.75 Filing Fee, Certified Copy, and Certificate of Status
	ET ADDRESS:		MAILING A	
_	ration Section		Registration	
	on of Corporations Building	3	Division of (
	i Building Executive Center (Tircle	P. O. Box 63 Tallahassee,	
	assee, FL 32301	J. 1010	i ananassec,	1 12 223 TT

FILED

CERTIFICATE OF AMENDMENT 2014

2014 JUN 30 PM 1: 18

TO SECRETARY OF STATE CERTIFICATE OF LIMITED PARTNERSHIPLL AHASSEE, FLORIDA OF

	OF	() (in) () (in) (in) (in) (in)
	16120, Ltd.	,
Insert name currently	on file with Florida Depart	ment of State
Pursuant to the provisions of section 620.120 imited liability limited partnership, whose c June 26, 2014 adopts the following certificate of amendments	ertificate was filed with d Florida document nur	the Florida Department of State on other A1400000346
This amendment is submitted to amend the follow	ving:	
A. If amending name, <u>enter the new name of</u> here:	the limited partnership	or limited liability limited partnership
New name must be distin	nguishable and contain an ac	eceptable suffix.
leceptable Limited Partnership suffixes: Limited Par leceptable Limited Liability Limited Partnership suff		
3. If amending mailing address and/or proprincipal office address here:	rincipal office address	enter new mailing address and/or
New Principal Office Address (Must be STREET address)		
New Mailing Address: (May he post office hox)		
C. If amending the registered agent and/or r new registered agent and/or the new registered		on our records, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Flori	da street address
_		, Florida
	City	7in 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 R	legistered Agent

D.	If amending the gener	al partner(s)	, <u>enter</u>	the nam	e and	business	address	of each	general	partner	being
add	led or removed from ou	r records:									

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
<u>GP</u>	BOE IV, LLC	16120 US Highway 19 N Clearwater, FL 33764	_ Add _ ✓ Remove
<u>GP</u>	16120 GP, LLC	1407 Piedmont Drive Eas Tallahassee, FL 32308	L ✓ Add ☐ Remove
			Add Remove
			_ Add _ Remove
			_ Add _ Remove
			_ Add _ Remove
E. If the limited plimited partnershi	partnership or limited liability p" status, enter change here:	y limited partnership is amen	- ding its "limited liability

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

This Limited Partnership hereby elects to be a "Limited Liability Limited Partnership."

This Limited Partnership hereby removes its "Limited Liability Limited Partnership" status.

F. If amending any other inform	ation, enter change(s) here: (Attach additional	sheets, if necessary.)
•	•		
,			
Effective date, if other than the date (Effective date cannot be prior to nor more State.)	of filing: than 90 days after the do	te this document is filed by t	he Florida Department of
Signature(s) of a general partner o	or all general partne	ers*:	
(*NOTE: Only one current general partner removing a "limited liability limited partner when adding or removing a "limited liability".	ship" election statement.	Chapter 620, F.S., requires	partnership is adding or all general partners to sign
			<u> </u>
			ASSA SAL
Signature(s) of all new or dissociat	ing gonovolæautus.	(a) if	STA :
Signature(s) of all new or dissociat	/ /	- -	8
BOEIV, LLC	Jame Cas	ow Durant, Ir, is To Dital Irretocable Tru	st its Manage
16120 GP, LLC		T. Burnette, its	
	<u></u>	sineric, 113	Manager
			
Certified Copy (optional): \$	52.50 52.50 \$8.75		