

A14 000 000 544

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

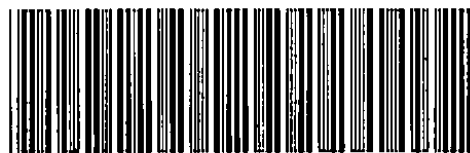
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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S. YOUNG



September 13, 2019

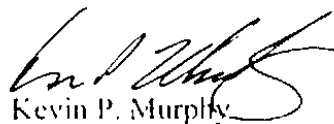
Florida Department of State
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Secretary of State:

Enclosed please find an original and one copy of a Certificate of Amendment to the Certificate of Limited Partnership of the Covelli Family Limited Partnership III. Also enclosed is our firm's check for the filing fee. Please process the enclosed filing and return a time-stamped copy to me in the envelope provided.

Thank you for your assistance.

Sincerely,



Kevin P. Murphy

KPM:kl
Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Covelli Family Limited Partnership III
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:

Kevin P. Murphy
Contact Person

Harrington, Hoppe & Mitchell, Ltd.
Firm/Company

108 Main Avenue, S.W., Suite 500
Address

Warren, OH 44481
City, State and Zip Code

kmurphy@hhmlaw.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kevin P. Murphy at (330) 392-1541
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

<input checked="" type="checkbox"/> \$52.50 Filing Fee	<input type="checkbox"/> \$61.25 Filing Fee and Certificate of Status	<input type="checkbox"/> \$105.00 Filing Fee and Certified Copy	<input type="checkbox"/> \$113.75 Filing Fee Certified Copy, and Certificate of Status
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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**

The Covelli Family Limited Partnership III

Insert name currently on file with Florida Department of State

Pursuant to the provisions of section 620.1202, Florida Statutes, this Florida limited partner
limited liability limited partnership, whose certificate was filed with the Florida Department
10-09-2014, assigned Florida document number A14000000544
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

B. If amending mailing address and/or principal office address, enter new mailing address and 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 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

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 and*

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

The term of the Partnership is amended to be perpetual.

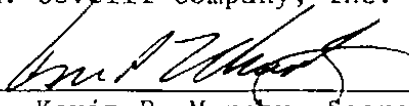
Effective date, if other than the date of filing: _____
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida D
State.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will
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
removing a "limited liability limited partnership" election statement. Chapter 620, F.S., requires all general p
when adding or removing a "limited liability limited partnership" election statement.)

A.M. Covelli Company, Inc. (P97000065339)


By: Kevin P. Murphy, Secretary

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