

(Re	equestor's Name)	
(Ad	dress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bı	ısiness Entity Nam	e)
(Do	ocument Number)	
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2015 JUN 18 P 3: 43
SECRETARY OF STATE
ALL AHASSEF FLORIDA

FILED
2015 JUN 18 P 3 43

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COVER LETTER

TO: Registration Division of	Section Corporations		
SUBJECT:		Island Associates, Ltd	
V	lame of Florida Limited Pa	rtnership or Limited Liability Limited Partn	ership
The enclosed Certif	ficate of Amendment a	nd fee(s) are submitted for filing.	
Please return all con	rrespondence concerni	ng this matter to:	
	Barry Jones	-	
	Contact Person		
	Firm/Company		
2	2675 Forest View D	r ·	
	Address		
	Estero, Fl 33928		\tau
	City, State and Zip Code		SE SE
bio	onesgtr@comcast.ne	et	CRE
	o be used for future annual		IAS
			18 SSE
For further informat	tion concerning this m	atter, please call:	6. E. D
	y Jones	at (239) 565-04	27월달 ₩
Name of Contr	act Person	Area Code and Daytime Telephone	Number 5
Enclosed is a check	for the following amo	unt:	
\$52.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fee and Certified Copy Certified Cop	y, and
STREET ADDRES	SS:	MAILING ADDRESS:	
Registration Section		Registration Section	
Division of Corpora	tions	Division of Corporations	
Clifton Building		P. O. Box 6327	
2661 Executive Cen		Tallahassee, FL 32314	
Tallahassee, FL 323	301		

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

	d Associates, l		
Insert name currently on fi	le with Florida Depart	ment of State	
Pursuant to the provisions of section 620.1202, F limited liability limited partnership, whose certifi 05/06/1983 assigned Flo adopts the following certificate of amendment to	cate was filed with	the Florida Department of https://doi.org/10.1001	
This amendment is submitted to amend the following:		mtoo parmoramp.	
A. If amending name, enter the new name of the linere:	imited partnership	or limited liability limited pr	a <u>rtnership</u>
New name must be distinguish	able and contain an ac	ceptable suffix.	
Acceptable Limited Partnership suffixes: Limited Partnersh Acceptable Limited Liability Limited Partnership suffixes: 1			Ρ.
B. If amending mailing address and/or principal office address here:	pal office address,	enter new mailing addres	s and/or
New Principal Office Address: (Must be STREET address)			<i>.</i> -
New Mailing Address: (May be post office box)		ZDIS JU SECRET TALLAHA	
C. If amending the registered agent and/or registened agent and/or the new registered officeness.		on our records Enter the na	me of the
Name of New Registered Agent:	<u></u>	William # 43	
New Registered Office Address:	Enter Flori	da street address	
		, Florida	
	City	7in Codo	

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 Ager	it. Signature of New	Registered Agent

D. If amending the general partner(s), enter the name and business address of each general partner being added or removed from our records:

<u>Title</u>	Name	Address	Type of Action
GP	Barry Jones	22675 Forest View Dr Estero, Fl 33928	✓Add Remove
			Add Remove
			ZILES JUN 1 CP 3:
			Add Remove
	ited partnership or limited l ership" status, enter change	lability limited partnership is ar here:	mending its "limited liability
This Li	mited Partnership hereby elec	ts to be a "Limited Liability Limite	d Partnership."
This Lin	mited Partnership hereby rem	oves its "Limited Liability Limited	Partnership" status.

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

	,
Effective date, if other than the date of filing:	
(Effective date cannot be prior to nor more than 90 day State.)	ys after the date this document is filed by the Florida Departm
Signature(s) of a general partner or all gen	eral partners*:
(*NOTE: Only one current general partner is required removing a "limited liability limited partnership" elect when adding or removing a "limited liability limited partnership".	to sign this document unless the limited partnership is addingtion statement. Chapter 620, F.S., requires all general partners attnership? election statement.)
77101 192195 3 10110 1116 11 111110 1117	
///_t-	•
Martis	
Mastro	
Mastro	
Martin	
Signature(s) of all new or dissociating gene	
Martin	
Martin	
Martin	ral partner(s), if any:
Martin	ral partner(s), if any:
Martin	ral partner(s), if any: