

08/22/2018 11:58 FAX 9417452093

6/22/2016

BLALOCK, WALTERS

Division of Corporations

001/004

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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((H16000152018 3)))



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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : BLALOCK, WALTERS, HELD & JOHNSON, P.A.  
Account Number : 076666003611  
Phone : (941)748-0100  
Fax Number : (941)745-2093

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: epennington@blalockwalters.com

LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION  
VENICE ADC, LLLP

Certificate of Status	0
Certified Copy	0
Page Count	03
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Electronic Filing Menu

Corporate Filing Menu

Help

K. SALLY  
EXAMINER

JUN 23



**FILED**  
**2016 JUN 22 AM 8:24**  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**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 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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
GP	GGR Investments, LLC	1001 3rd Avenue W. Suite 600 Bradenton, FL 34205	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
GP	NDC Venice ADC, LLC	1001 3rd Avenue W. Suite 600 Bradenton, FL 34205	<input checked="" 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 amendment.)**

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TALLAHASSEE, FLORIDA

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

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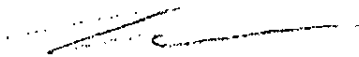
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Effective date, if other than the date of filing: \_\_\_\_\_

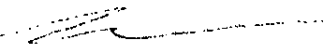
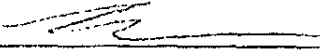
*(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)*

**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 sign when adding or removing a "limited liability limited partnership" election statement.)

	
_____	_____
_____	_____
_____	_____
_____	_____

**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