# A17399

(Requ	estor's Name)	
(Addre	ess)	
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(City/S	State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Busin	ness Entity Nar	me)
(Docu	ment Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fili	ing Officer:	

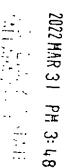
Office Use Only





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APPROVED AND FILED

### **COVER LETTER**

TO: Registration S			
Division of C	orporations		
	'IS ARDICE RRH, L'		
Nai	me of Florida Limited Par	tnership or Limited Liability	Limited Partnership
The enclosed Certific	cate of Amendment ar	nd fee(s) are submitted	for filing.
Please return all corre	espondence concernin	ng this matter to:	
J. ROLANDO SAN	NCHEZ		
	Contact Person		
<del></del>	Firm/Company		
24207 NW 110TH	AVE.		
	Address		
ALACHUA, FL 3	2615-7829		
C	ity, State and Zip Code		
SanchezPlanningD	~		
E-mail address: (to	be used for future annual	report notification)	
For further information	on concerning this ma	atter, please call:	
J. ROLANDO SAN	NCHEZ	at ( 352 ) 2	62-4040
Name of Contac	et Person	· · · · · · · · · · · · · · · · · · ·	ime Telephone Number
Enclosed is a check f	or the following amou	unt:	
☐ \$52.50 Filing Fee	☐\$61.25 Filing Fee and Certificate of Status	<b> ■</b> \$105.00 Filing Fee and Certified Copy	☐\$113.75 Filing Fee, Certified Copy, and Certificate of Status
Mailing Address:		Street Addre	
Registration Section	•	Registration	
Division of Corporat P.O. Box 6327	ions	Division of C The Centre o	•
Tallahassee, FL 3231	4		roe Street, Suite 810
1 411441400000, 1 15 5251		Tallahassee,	

### CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

EUSTIS ARD	ICE RRH, LTD.		
Insert name currently on file	e with Florida Department of State		
Pursuant to the provisions of section 620.1202, Florida Statutes, this Florida limited partnership or imited liability limited partnership, whose certificate was filed with the Florida Department of State on JULY 3, 1984, assigned Florida document number			
<ul> <li>A. If amending name, enter the new name of the line</li> <li>here:</li> </ul>	mited partnership or limited liability limited partnership		
New name must be distinguisha	ible and contain an acceptable suffix.		
Acceptable Limited Partnership suffixes: Limited Partnershi Acceptable Limited Liability Limited Partnership suffixes: L			
B. If amending mailing address and/or princip principal office address here:	al office address, enter new mailing address and/or		
New Principal Office Address: (Must be STREET address)			
New Mailing Address: (May be post office box)			
C. If amending the registered agent and/or registere registered agent and/or the new registered office add	d office address on our records, <u>enter the name of the new</u> ress here:		
Name of New Registered Agent:			
New Registered Office Address:	2022		
	Enter Florida street address		
	Florida $\omega$		

City

#### 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.	

1000		C 5 2 1 1 1 1 1
. If Changing R	egistered Agent, Signati	ure of New Kepistered Avent -
If Changing R	egistered Agent, Signati	ure of New Registered Agent

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

<u>Title</u>	Name	Address	Type of Action
_GP	STERLING E. STULTZ	(Deceased)	_
<u>GP</u>	KARL THE LOSEN	235 SW 11th Place 235 SW 11th Place	
			_
			_
<del></del>			_ □ Add □ Remove
			_

E. If the limited partnership or limited liability limited partnership is amending its "limited liability limited partnership" status, enter change here:

0	This Limited Partnershi	p hereby elects to be a "Limited	Liability Limited Partnership.'
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☐ 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.)

	· · · · · · · · · · · · · · · · · · ·
ffective date, if other than the date of filing:	er the date this document is filed by the Florida Department of
ate.)	
ote: If the date inserted in this block does not meet the apple listed as the document's effective date on the Department	
instea as the document series we date on the Bepariment	or state streetas.
ignature(s) of a general partner or all general p	partners*:
NOTE. Only one current canoral partner is required to sign	gn this document unless the limited partnership is adding or
moving a "limited liability limited partnership" election sta	atement. Chapter 620, F.S., requires all general partners to sign
hen adding or removing a "limited liability limited partners	ship" election statement.)
	J. ROLANDO SANCHEZ General Partner
	Ocheral I adici
ignature(s) of all new or dissociating general p	artner(s), if any:
STERLING E. STULTZ, Deceased	
	KARL THE LOSEN
	Dissociating General Partner
Filing Fee: \$52.50	
Certified Copy (optional): \$52.50	
Certificate of Status (optional): \$8.75	