CAFIFAL C417 E. Virginia Stree S
(850) 224-8870 • 30



Art of Inc. File_

LTD Partnership File_

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	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art. of Amend. File
1	RA Resignation Mange
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
	Fictitious Owner Search
	Vehicle Search
	Driving Record
	UCC 1 or 3 File
	UCC 11 Search
	UCC 11 Retrieval
	Courier

Signature		
Requested by	9-6-01	1.30
Name	Date	Time
Walk-In	Will Pick Up	



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

September 6, 2001

CAPITAL CONNECTION

TALLAHASSEE, FL

SUBJECT: LGL TROPICAIRE, LTD.

Ref. Number: A18038

We have received your document for LGL TROPICAIRE, LTD. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$35.00 payment.

Our records show that the GENERAL PARTNER is ZEQUEIRA INVESTMENT CO. not DAL & ASSOCIATES, INC. Please correct as appropriate.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr Corporate Specialist

Letter Number: 801A00050364

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LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED
OFFICE OR REGISTERED AGENT, OR BOTH
SEC
Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes, the undersigned
minited partnership submits the following statement in order to change its registered of the
registered agent, or both, in the state of Florida.
1. LGL TROPICAIRE, LTD.
Name of the limited partnership
2. 19/11/1984 3. H18038
Date of filing/registration in Florida Document number assigned
4. The name of the registered agent and the registered office address as shown on the records of the Florida
Department of State: OSNOWAR Conporation Service Company
Name Ct
_1201 FAGS 3/18EX
Tallahassee FL 32301
City, State and Zip
·
5. The name and address of the new registered agent and/or office:
CAPITAL CONNECTUM, Inc.
Name
Florida street address (P.O. Box not acceptable)
City, State and Zip
5. Such change(s) was/were authorized by the general partners.
Albania a Fellina Como
lighature of General Partner
Pala o DA TLAVESTANDAT 10
hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to omply with the provisions of all statutes relative to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered performance of my duties, and
am familiar with and accept the obligations of my position as registered agent. Or, if this document is eing filed merely to reflect a change in the registered office address, I hereby confirm that the limited earthership has been notified in writing of this change.
\(\Lambda \) \(\La
1. At 1/1/10 As
ignorphic of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 Filing Fee: \$35.00