



THE UNITED STATES
CORPORATION
COMPANY

A18048

ACCOUNT NO. : 072100000032

REFERENCE : 042659 80640A

AUTHORIZATION : Patricia Pujols

COST LIMIT : \$ 105.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 NOV 24 PM 3:43

ORDER DATE : November 24, 1998

ORDER TIME : 11:34 AM

ORDER NO. : 042659-005

CUSTOMER NO: 80640A

900002695669--9

CUSTOMER: Louise Spivey, Esq
Lane Trohn Clarke Bertrand
One Lake Morton Drive

Lakeland, FL 33801

DOMESTIC AMENDMENT FILING

NAME: CITRUS PARTNERS, LTD

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Angie Glisar

EXAMINER'S INITIALS:

B/K
11/24/98

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**CERTIFICATE OF AMENDMENT
TO
APPLICATION FOR REGISTRATION
OF
CITRUS PARTNERS, LTD.**

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Pursuant to the provisions of Section 620.173, Florida Statutes, this foreign limited partnership hereby submits this certificate of amendment to its registration application:

The registration application is amended as follows:

1. The following are the names of the general partners (both managing general partners and special general partners) who have withdrawn as such from the partnership:

Managing General Partners:	W. Garvie Hall Byram E. Dickes
Special General Partners:	C. Bruce McLagan Donald B. Shackelford F. Samuel Smith Thomas N. Urban Albertus W. Van Den Broek

2. The following is the name and address of the new general partner being admitted:

CPL, INC., a Florida corporation
2060 Eight Foot Road
Bartow, FL 33830

8940086156

Dated this 20th day of November, 1998.

CPL, INC.

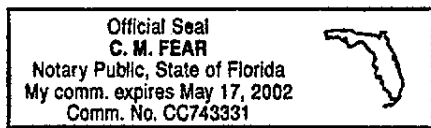
By: *W. Garvie Hall*
W. GARVIE HALL, President


(W. GARVIE HALL is also an individual
managing General Partner.)

STATE OF FLORIDA,
COUNTY OF POLK.

The foregoing instrument was acknowledged before me this 20th day of November, 1998, by **W. Garvie Hall, President of CPL, INC.**, (☒) who is personally known to me or (☐) who has produced _____ as identification and who did not take an oath.

(Affix Notary Seal)




Print Name: C. M. FEAR
NOTARY PUBLIC, State of Florida
My Commission Expires: _____

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