## A18185

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## **COVER LETTER**

	Corporations		
SUBJECT: PATR	ONIS BROTHERS ENTERF	PRISES LIMITED PAI	RTNERSHIP
1	Name of Florida Limited Part	tnership or Limited Lia	ability Limited Partnership
The enclosed Certi	ficate of Amendment ar	nd fee(s) are submit	tted for filing.
Please return all co	orrespondence concernin	ng this matter to:	
Scott B. Barloga			
	Contact Person		
Pope & Barloga, P.A.			
	Firm/Company		
P.O. Box 1609			
	Address		
Panama City, FL 324	02		
	City, State and Zip Code		
sbarloga@popebarlo	ga.com		
E-mail address:	to be used for future annual	report notification)	
For further inform	ation concerning this ma	atter, please call:	
Scott B. Barloga		at ()	784-9174
Name of Cor	itact Person	Area Code and	Daytime Telephone Number
Enclosed is a chec	k for the following amo	unt:	
S52.50 Filing Fee	☐\$61.25 Filing Fee and Certificate of Status	□\$105.00 Filing F and Certified Copy	
STREET ADDR	ESS:	MAILI	NG ADDRESS:
Registration Section	on	Registration Section	
Division of Corpo	rations	Division of Corporations	
Clifton Building		P. O. Box 6327 Tallahassee, FL 32314	
2661 Executive Control Tallahassee, FL 3		ramanas	See, FL 32314

## CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

PATRONIS BROTHERS ENTERP	RISES LIM	ITED PARTNERSHIP		$O_{\lambda}$	_
Insert name eu	rrently on fi	le with Florida Departr	nent of State	·	
Pursuant to the provisions of section 62 limited liability limited partnership, wh 10/31/1984, as: adopts the following certificate of americans.	ose certifi signed Flo	cate was filed with orida document nun	the Florida De iber <u>A18185</u>	epartment of	
This amendment is submitted to amend the	following:				
A. If amending name, enter the new nathere:	me of the	imited partnership	or limited liabi	lity limited pa	<u>irtnership</u>
New name must b	e distinguisl	nable and contain an ac	ceptable suffix.	<del></del> .	
Acceptable Limited Partnership suffixes: Limited Acceptable Limited Liability Limited Partnersh.  B. If amending mailing address and principal office address here:  New Principal Office Ad (Must be STREET address)	ip suffixes: for princi	Limited Liability Limite	ed Parmership, 1 enter new ma		
New Mailing Address:  (May be post office box)		3613 DELWOOD D PANAMA CITY, FI	RIVE		
C. If amending the registered agent and new registered agent and/or the new regis			on our records.	, enter the na	mg of the
Name of New Registered Agent:	JOHN	NY T. PATRONIS	· -		
New Registered Office Address:	36131	DELWOOD DRIVE Enter Flori	da street addres	<u></u>	
	DAN'A	MA CITY			
	1737373	City	Florida <u>3</u> 	zip Code	

## New Registered Agent's Signature, if changing Registered Agent:

		If Changing Registered Agent. Si	nature of New Registered A
If amending the general partner(s), enter the name and business address of each general partner led or removed from our records:			
<u>Title</u>	<u>Name</u>	Address	Type of Action
GP	JIMMY T. PATRONIS	3144 N KINGS DRIVE PANAMA CITY, FL 32408	□ Add □ Remove
			□ Add □ Remove
			☐ Add☐ Remove
			☐ Add ☐ Remove
<del></del>			☐ ☐ Add ☐ Remove
the limite	od nartnershin or limited liab	oility limited partnership is am	ending its "limited li

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

F. If amending any other information, enter change(s) here: tAttach a	additional sheets, if necessary,)
Effective date, if other than the date of tiling: 9 12-18	
(Effective date cannot be prior to nor more than 90 days after the date this document is State.)	spiled by the Florida Department of
Note: If the date inserted in this block does not meet the applicable statutory filing required is the document's effective date on the Department of State's records.	girements, this date will not
•	
Signature(s) of a general partner or all general partners*:	
**NOTE: Only one current general partner is required to sign this document unless th	e limited partnership is adding or
removing a "limited liability limited partnership" election statement. Chapter 620, F.S when adding or removing a "limited liability limited partnership" election statement.)	
Alle Stern	
JOHNNY T. PATRONIS	<del>15</del>
	SE -
	26
Signature(s) of all new or dissociating general partner(s), if any:	D 189 4
$\sim$	が、一
JIMMY T. PATRONIS	
<del></del>	
Filing Fee: \$52.50	
Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	