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(Rec	questor's Name)		
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PICK-UP	☐ WAIT	MAIL	
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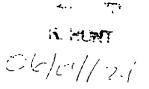
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08/04/24--01013--017 **17.50

04/30/24--01007--017 **35.00



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COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: Down Home Realty, LLLP Name of Florida Limited Partnership or Limited Liability Limited Partnership					
The enclosed Certificate of Amendment and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter to:					
Vickie Knight - Joy Lontact Person					
Down Home Realty, LLLP Firm/Company					
1305 Cleveland Aue, Ste B					
Wildwood, FL 34785 City, State and Zip Code					
VICKIL & downhorne RE. corn E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Vickie Knight - Toy at (352) 267 - 6334 Name of Contact Person Area Code and Daytime Telephone Number					
Enclosed is a check for the following amount:					
S52.50 Filing Fee S61.25 Filing Fee and Certified Copy Status SS2.50 Filing Fee and Certified Copy Certified Copy, and Certificate of Status					
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303					

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

Down Home Insert name currently on file	Realty,	LLLP
Insert name currently on file	with Florida Depar	tment of State
Pursuant to the provisions of section 620.1202, Flo limited liability limited partnership, whose certific <u>June 9</u> 2021, assigned Flor adopts the following certificate of amendment to it	ate was filed with	h the Florida Department of State on
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited partnership	or limited liability limited partnership
<u>here</u> :		
New name must be distinguisha	ble and contain an a	cceptable suffix.
Acceptable Limited Partnership suffixes: Limited Partnershi Acceptable Limited Liability Limited Partnership suffixes: Li		
B. If amending mailing address and/or princip principal office address here:	al office address	s, enter new mailing address and/or
New Principal Office Address:		
(Must be STREET address)		
New Mailing Address: (May be post office box)		
(and as pain sy), as anny		· •
C. If amending the registered agent and/or registered registered agent and/or the new registered office add		n our records, <u>enter the fiame of the new</u>
Name of New Registered Agent:		
New Registered Office Address:	Enter Flo	rida street address
		, Florida
0	City	Zip Code

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:

Title	Name	Address	Type of Action
<u>\$</u>	Kelly Barbee Shipes	2005. Warfield Ave Wildward, FL 34785	Add Remove
			☐ Add☐ Remove
			☐ Add ☐ Remove
			☐ Add☐ Remove
			☐ Add ☐ Remōve
			Add 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.

 F. If amending any other information, enter ch 	ange(s) here: (Attach additional sheets, if necessary.)
Effective date, if other than the date of filing:	
(Effective date cannot be prior to nor more than 90 days afte. State.)	r the date this document is filed by the Florida Department of
Note: If the date inserted in this block does not meet the appl	icable statutory filing requirements, this date will not
be listed as the document's effective date on the Department	
Signature(s) of a general partner or all general p	partners*:
(*NOTE: Only one current general partner is required to sig	n this document unless the limited partnership is adding or
removing a "limited liability limited partnership" election sta when adding or removing a "limited liability limited partners	tement. Chapter 620, F.S., requires all general partners to sign
	inp ciction swellene.)
1.14/r// (_	
MAGU T	
l	
Signature(s) of all new or dissociating general pa	artner(s), if any:
	•
16-2	: :
	. 30

Filing Fee: Certified Copy (optional): Certificate of Status (optional):

\$52.50 \$52.50 \$8.75