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SECRETARY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON

AMXIVAZIONO

EXAPAINEM

## **COVER LETTER**

TO: Registration S					
Division of Co	orporations		,		
SUBJECT:	ANGLE	RS COVE WEST,	LTD.		
Nan	e of Florida Limited Pa	rtnership or Limited Liabili	ty Limited Partnership		
The enclosed Certification	ate of Amendment a	nd fee(s) are submitted	for filing.		
Please return all corre	spondence concerni	ng this matter to:			
1	NGA W. WELCH				
	Contact Person				
PETER	PETER A. MCFARLANE, P.A.				
	Firm/Company				
500 S FL	ORIDA AVE, SUIT	E 715			
	Address				
	(ELAND, FL 3380	1	•		
Ci	ty, State and Zip Code				
E-mail address: (to b	e used for future annual	report notification)			
For further information	n concerning this m	atter, please call:			
INGA W	WELCH	at ( 863 )	647-1581		
Name of Contact	Person		time Telephone Number		
Enclosed is a check for	or the following amo	unt:	·		
\$52.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fee and Certified Copy	\$113.75 Filing Fee, Certified Copy, and Certificate of Status		
STREET ADDRESS	:	MAILING A	ADDRESS:		
Registration Section		Registration Section			
Division of Corporation Clifton Building	ons	Division of Corporations P. O. Box 6327			
2661 Executive Cente	r Circle	Tallahassee,	<del>-</del> :		
Tallahassee FL 3230		- 01101100366,	*** ******		

## CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

ANGLERS Insert name currently on	COVE WES		<del></del>
moen mane contently on	i ine wini i lesula l	reputation of oute	
Pursuant to the provisions of section 620.1202, limited liability limited partnership, whose cert DECEMBER 16, 1985, assigned F	ificate was file	with the Florida Department	
adopts the following certificate of amendment			
This amendment is submitted to amend the following	g:		
A. If amending name, <u>enter the new name of the here</u> :	e limited partne	rship or limited liability limited	<u>partnership</u>
New name must be distingu	ishable and contai	n an acceptable suffix.	
Acceptable Limited Partnership suffixes: Limited Partne Acceptable Limited Liability Limited Partnership suffixe	ership, Limited, L.1 es: Limited Liabilit	P., LP, or Ltd. v Limited Partnership, L.L.L.P. or Ll	LLP.
B. If amending mailing address and/or prin principal office address here:	cipal office ad	dress, <u>enter new mailing add</u>	ress and/or
New Principal Office Address:			_ =
(Must be STREET address)			- <b>i</b>
New Mailing Address: (May he post office hox)			SECRETARY ISION OF CO
			OF STA
C. If amending the registered agent and/or reginew registered agent and/or the new registered of			name of them
Name of New Registered Agent:			<u> </u>
New Registered Office Address:	Ente	r Florida street address	<u> </u>
		Florida	
<del></del>	City	Zip Code	

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

		If Changing Registered Age	nt, Signature of New Registered
	the general partner(s), ed from our records:	enter the name and business addre	ess of each general partn
<u>itle</u>	<u>Name</u>	Address	Type of Action
	·		Add Remove
<u></u>			Add Remove
	<u> </u>		Add 5
	·		Add Remove
			Add Remove
			AddRemove

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

This Limited Partnership hereby elects to be a "Limited Liability Limited Partnership."

This Limited Partnership hereby removes its "Limited Liability Limited Partnership" status.

Section 1.2. Commencement ar	nd Term of th	e Partnership. The Partnership shall commence
,		ate of Limited Partnership with the Secretary of
State of Florida and shall continu	ue until Dece	ember 31, 2030, unless sooner terminated under
the Provisions of this Agreemen	it, as amende	ed by the terms of this Agreement.
Effective date, if other than the date (Effective date cannot be prior to nor more State.)	e of filing: e than 90 days aj	ter the date this document is filed by the Florida Department of
Signature(s) of a general partner	or all genera	l partners*:
(*NOTE: Only one current general partner removing a "limited liability limited partner when adding or removing a "limited liability".	ership" election:	sign this document unless the limited partnership is adding or statement. Chapter 620, F.S., requires all general partners to sign ership" election statement.)
CENTURY REALTY FUNDS	NC.	<u> </u>
Signature(s) of all new or dissocia	ating general	partner(s), if any:
	····	
Filing Fee:	\$52.50	rea.
Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$8.75	