# A 22552

(Re	questor's Name)	)
(6.4)	dress)	
	aress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	ne #)
PICK-UP	WAIT	MAIL .
(Bu	siness Entity Na	me)
, (Do	cument Number	)
Certified Copies	_ Certificate	s of Status
WII-	59903	
Special Instructions to	Filing Officer:	
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### **COVER LETTER**

Division of Corporations	
SUBJECT:	CBL, Ltd.
Name of Florida Limited P	artnership or Limited Liability Limited Partnership
The enclosed Certificate of Amendment	and fee(s) are submitted for filing.
Please return all correspondence concern	ing this matter to:
•	
James C. Landers	
Contact Person	
Limited Partner, CBL, I	_td.
Firm/Company	
2016 Manchester Wa	ау
Address	<u> </u>
Roswell, GA 30075	
City, State and Zip Code	
jimlanders@bellsouth.	net
E-mail address: (to be used for future annua	
For further information concerning this r	natter, please call:
James C. Landers	at ( 770 ) 312-7833
Name of Contact Person	Area Code and Daytime Telephone Number
Enclosed is a check for the following am	ount:
\$52.50 Filing Fee and Certificate of Status	\$105.00 Filing Fee and Certified Copy  Certified Copy, and Certificate of Status
STREET ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building 2661 Executive Center Circle	P. O. Box 6327 Tallahassee, FL 32314
Tallahassee, FL 32301	1 ananassee, 1 15 52517

#### Florida Department of State

Calculation of Amount due for reinstatement and name change of CBL, Ltd., Document A22552

<u>Description</u>	<u>Amount</u>
Certificate of Status	\$5.00
Reinstatement Fee	\$100.00
Annual Report Fee (3 years)	\$416.25
Filing Fee, Certified Copy and Certificate of Status	\$113.75
Total, paid to Florida Secretary of State	\$635.00



November 29, 2011

JAMES C. LANDERS, LIMITED PARTNER CBL, LTD. 2016 MANCHESTER WAY ROSWELL, GA 30075

SUBJECT: CBL, LTD. Ref. Number: A22552

We have received your document for CBL, LTD. and your check(s) totaling \$635.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a limited liability company, but your entity is a limited partnership. Please complete and return the enclosed blank form(s).

The registered agent must sign accepting the designation.

A general partner must sign the document.

The total amount due is \$3113.75.

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) 245-6911.

Brenda Tadlock Senior Section Administrator

Letter Number: 511A00026748

## CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

7
J. P.
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CBL, Ltd.

Insert name currently on file with Florida Department of State

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AH 8: 4	
nership or 😤 nent of State on 2552	
nited partnership	<u> </u>
or LLLP.	
address and/or	

limited liability limited partnership, whose certific	ate was filed wi	th the Florida Department of State on
05/14/1986, assigned Flor adopts the following certificate of amendment to it	ida document ni ts certificate of l	imited partnership.
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the lin</u> here:	mited partnershi	p or limited liability limited partnership
Burton	Farm 1td	
New name must be distinguisha	able and contain an	acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Partnershi Acceptable Limited Liability Limited Partnership suffixes: L		
B. If amending mailing address and/or princip <u>principal office address here</u> :	al office addre	ss, enter new mailing address and/or
New Principal Office Address:		
(Must be STREET address)		
New Mailing Address:		
(May be post office box)		
C. If amending the registered agent and/or registeness new registered agent and/or the new registered office		s on our records, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
		, Florida
	Citv	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.

:le	<u>Name</u>	Address	Type of Action
			∏Add
			Damaria
<del></del>			
			<u></u>
			Remove
			Add
	ed partnership or limited l ship" status, enter change	iability limited partnership is	amending its "limited

F. If amending any other information	ı, enter change(s)	here:	(Attach additional sheets, if necessary.)
		· <del></del>	
Effective date, if other than the date of fil (Effective date cannot be prior to nor more than 9 State.)	ing: 00 days after the da	te this do	cument is filed by the Florida Department of
Signature(s) of a general partner or all	general partne	ers*:	
(*NOTE: Only one current general partner is requestion removing a "limited liability limited partnership" when adding or removing a "limited liability limit	election statement. ted partnership" ele	Chapter	620, F.S., requires all general partners to sign
arolya Grandels	<u></u>		
	_	<del></del>	
. <u> </u>	_		
Signature(s) of all new or dissociating g	<u>general partner</u>	(s), if a	<u>ny</u> :
	_		
	_		
	_		
Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.70	0		