

Florida Department of State **Division of Corporations**

Public Access System Katherine Harris, Secretary of State

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To: Division of Corporations Fax Number

From:

Account Name Account Number : 076077000521 Phone Fax Number

: (850) 922-4003 : RUDEN, MCCLOSKY, SMITH, SCHUSTER & RUSSELE, : (954)761-2910 : (954)764-4996

LIMITED PARTNERSHIP AMENDMENT

CALOOSA MOBILE HOME ESTATES, LTD.

Certificate of Status	0
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Page Count	01
Estimated Charge	\$105.00

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TO:2066#26387#0015##185 P:2/2

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STATEMENT OF QUALIFICATION FOR FLORIDA LIMITED LIABILITY LIMITED PARTNERSHIP		
1. The name of the limited partnership as identified in the records of the Florida Department of State: Caloosa Mobile Home Estates, Ltd.		
Insert limited partnership's Florida document number:		
partnership filing fees. 2. Suffix adopted for the above named partnership: <u>[LLP</u> ('Registered Limited Liability Partnership," "Limited Liability Partnership," "R.L.P.," "R.L.P.," "RLLP," or "LLP")	. -	
("Registered Linked Linked Linked Linker, Fillede Linker, Fill	•	
4. The street address of principal office in Florida:	• <u>-</u> ·	· · · · · · · · · · · · · · · · · · ·
5. The limited partnership hereby elects to be a limited liability limited partnership.		
 6. The effective date of this filing shall be: X as of the date this document is filed with the Florida Secretary of State or a date later than the time of filing: 		
7. The name and Florida street address of the partnership's agent for service of process: Harold E. Regan 211 South Gadsen	<u> </u>	-
Tallahassee , Florida 32301		-
The execution of this statement as a partner constitutes an affirmation under the penalties of perjury that the facts stated herein are true. $\sum_{i=1}^{n}$		
Signed this 15 day of $4y$ of 2000	m	
Signature of TWO Partners:	D	
Typed or printed names of partners signing above: Fred Morganroth		· .

Filing Fee: \$25.00 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75

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