

A26056

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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20 MAR -6 PM 1:27

MAR 09 2023  
C McNAIR

**Bruce Langford**  
**2358 Riverside Avenue, Apt 506**  
**Jacksonville, Florida 32204**

3/3/20

Florida Department of State  
Division of Corporations  
ATT: Cheryl R. McNair, Regulatory Specialist II  
PO Box 6327  
Tallahassee, FL 32314

RE: Letter Number 720A00003252

Dear Ms. McNair,

Thank you for your assistance in referring me to Darlene Cornel regarding the enclosed Certificate of Amendment for the Sunny Money Partnership. Darlene instructed me to send the Cover Letter and Certificate of Amendment Form back to you without the documents that I had previously enclosed.

She told me to simply complete the sections on the Form that need to be amended. Any additional information or documents were not required. Attached is the completed Certificate of Amendment Form with changes to three Sections:

**Section B**

Mailing address is 2358 Riverside Ave, Apt 506, Jacksonville, FL 32204

**Section C**

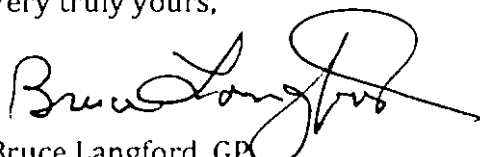
Registered Agent was changed to Mark Shorstein, CPA, 8265 Bayberry Rd, Jacksonville, FL 32256

**Section F**

Partnership agreement has been amended to reflect term ending date of 12/31/50

Please contact me if you have any questions or require additional items.

Very truly yours,



Bruce Langford, GP  
Sunny Money Partners  
305.794.2868

2020 MAR -6 AM 10:52

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Sunny Money Partners Limited Partnership  
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:

Bruce Langford  
Contact Person

N/A  
Firm/Company

2358 Riverside Ave, Apt 506  
Address

Jacksonville, FL 32204  
City, State and Zip Code

Blangford45@gmail.com  
E-mail address: (to be used for future annual report notification)

20 MAR -6 PM 1:21

For further information concerning this matter, please call:

Bruce Langford at ( 305 ) 794-2868  
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- \$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:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

ENCLOSED WITH PREVIOUS SUBMISSION

CERTIFICATE OF AMENDMENT  
TO  
CERTIFICATE OF LIMITED PARTNERSHIP  
OF

20 MAR -6 PM 1:27

Sunny Money Partners Ltd

Insert name currently on file with Florida Department of State

Pursuant to the provisions of section 620.1202, Florida Statutes, this Florida limited partnership or limited liability limited partnership, whose certificate was filed with the Florida Department of State on 1/3/96 at 9:16 AM, assigned Florida document number A26056, adopts the following certificate of amendment to its certificate of limited partnership.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited partnership or limited liability limited partnership here:**

New name must be distinguishable and contain an acceptable suffix.

*Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.*

*Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or L.L.L.P.*

**B. If amending mailing address and/or principal office address, enter new mailing address and/or principal office address here:**

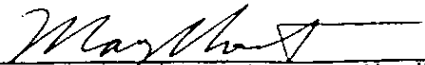
<u>New Principal Office Address:</u> <i>(Must be STREET address)</i>	<u>2358 Riverside Ave</u> <u>Apt 506</u> <u>Jacksonville, Fl 32204</u>
<u>New Mailing Address:</u> <i>(May be post office box)</i>	<u>same as above</u>

**C. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

<u>Name of New Registered Agent:</u>	<u>Mark Shorstein, CPA</u>
<u>New Registered Office Address:</u>	<u>8265 Bayberry Road</u> <i>Enter Florida street address</i> <u>Jacksonville</u> Florida <u>32256</u> <i>City Zip Code</i>

**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:**

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> 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.

**(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: (Attach additional sheets, if necessary.)

The term of the partnership has been extended by a unanimous vote of all partners to XXXX

or

The partnership agreement has been amended to reflect a term ending XXXX December 31, 2050

~~The partnership agreement has been amended to reflect change in ownership interest, change in cotodial status of limited partners and change of name due to marriage.~~

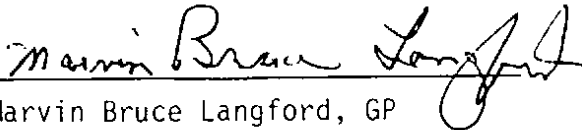
MBL

Effective date, if other than the date of filing: \_\_\_\_\_  
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**Signature(s) of a general partner or all general partners\*:**

(\*NOTE: Only one current general partner is required to sign this document unless the limited partnership is adding or removing a "limited liability limited partnership" election statement. Chapter 620, F.S., requires all general partners to sign when adding or removing a "limited liability limited partnership" election statement.)

  
Marvin Bruce Langford, GP

**Signature(s) of all new or dissociating general partner(s), if any:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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