A27079

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COVER LETTER

TO: Registration S Division of C	orporations	•	
SHRIFCT: HERRING	G FAMILY PARTNERSI	HP, LTD.	
Nar	ne of Florida Limited Part	nership or Limited Li	ability Limited Partnership
The enclosed Certific	cate of Amendment an	d fee(s) are submi	tted for filing.
Please return all corre	espondence concernin	g this matter to:	
Sabrina Chianese			
	Contact Person		
Clark, Campbell, Lancas	ter, Workman & Airth, P.,	A	
	Firm/Company		
500 South Florida Avenu	ie, Suite 800		
	Address		
Lakeland, FL 33801			
C	ity, State and Zip Code		
schianese@clarkcampb	ell-law.com		
E-mail address: (to	be used for future annual	report notification)	
For further informati	on concerning this ma	uter, please call:	
Sabrina Chianese		at (⁸⁶³)	647-5337
Name of Contac	rt Person	Area Code and	Daytime Telephone Number
Enclosed is a check f	for the following amou	unt:	
■ \$52.50 Filing Fee	☐\$61.25 Filing Fee and Certificate of Status	□\$105.00 Filing I and Certified Copy	
Mailing Address: Registration Section Division of Corporat P.O. Box 6327 Tallahassee, FL 3231		Divisior The Cer 2415 N.	address: tion Section of Corporations stre of Tallahassee Monroe Street, Suite 810 see, FL 32303

CERTIFICATE OF AMENDMENT TO

FILED

Zip Code

CERTIFICATE OF LIMITED PARTNERSHIP OF 2024 HAR 25 AH 9: 23

HERRING FAMILY PARTNERSHIP, I		Florida Department of State
Insert name curren	tly on tile with I	Florida Department of State (1997) (1997) (1997) (1997)
	certificate w ned Florida do	Statutes, this Florida limited partnership or as filed with the Florida Department of State on ocument number A27079, tificate of limited partnership.
This amendment is submitted to amend the follo	owing:	
A. If amending name, <u>enter the new name</u> <u>here</u> :	of the limited	partnership or limited liability limited partnership
New name must be di	stinguishable an	d contain an acceptable suffix.
Acceptable Limited Partnership suffixes: Limited I Acceptable Limited Liability Limited Partnership s		
B. If amending mailing address and/or principal office address here:	principal off	fice address, enter new mailing address and/or
New Principal Office Addre (Must be STREET address)	<u>ss:</u>	
New Mailing Address: (May be post office box)		
C. If amending the registered agent and/or registered agent and/or the new registered o		re address on our records, <u>enter the name of the new</u> nere:
Name of New Registered Agent:	Clark, Campbe	ell, Lancaster, Workman & Airth, P.A.
New Registered Office Address:	500 South Flo	rida Avenue, Suite 800 Enter Florida street address
	Lakeland	Florida 33801

City

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.

Manuse Granuse
The 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>	Name	Address	Type of Action
GP = General	Jerry J. Herring	2912 SANCTUARY CIRCLE LAKELAND, FL 33803	□ Add ■ Remove
GP = General	Janis Herring Partner	2912 SANCTUARY CIRCLE LAKELAND, FL 33803	
			□ Add □ Remove
			□ Add □ Remove
			□ Add □ Remove

E. If the limited partnership or limited liability limited partnership is amending its "limited liability limited partnership" status, enter change here:

0	This Limited Partnershi	p hereby elects to be a '	"Limited Liability Limited	Partnership."

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

[☐] This Limited Partnership hereby removes its "Limited Liability Limited Partnership" status.

F. If amending any other information	on, enter change(s	s) here: (Attach additional sheets, if necessary.)
<u> </u>		
Effective date, if other than the date of f (Effective date cannot be prior to nor more than	iling: 90 days after the do	ate this document is filed by the Florida Department of
State.) Note: If the date inserted in this block does not to be listed as the document's effective date on the		
Signature(s) of a general partner or a	ll general partn	ers*:
(*NOTE: Only one current general partner is removing a "limited liability limited partnership when adding or removing a "limited liability limited liability	" election statement	document unless the limited partnership is adding or t. Chapter 620, F.S., requires all general partners to sig lection statement.)
Janis Horing		
Janis Herring		
		. .
		
Signature(s) of all new or dissociating	general partne	er(s), if any:
() Walkan ?		
Janis Herring		
		
· · · · · · · · · · · · · · · · · · ·		
Filing Fee: \$52.	50	
Certified Copy (optional): \$52 Certificate of Status (optional): \$8.		