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00789-00524-002071 (Requestor's Name) (Address)	300068147733		
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## **COVER LETTER**

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**Registration Section** TO: **Division of Corporations** 

Tallahassee, FL 32301

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## SUBJECT: DSA INVESTMENTS, LTD. (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:

M. JULIAN	PROCTOR, JE	۲.	5.55	FILE
	(Contact Person)	· · · · · · · · · · · · · · · · · · ·	L CT	
AUSLEY &	MCMULLEN, F	P.A.	H H	
	(Firm/Company)	······································	5.1×	~ ~
P.O. BOX 3	· · · ·		ino.	
<u> </u>	(Address)		OR	E u
TALLAHAS	SEE, FL 3230	)2	6	nu -
	(City, State and Zip Code	)		
	ntion concerning this m PROCTOR, JP Itact Person)	R. at 850 42	25-5300 Daytime Telephone Number)	-
Enclosed is a check	for the following amo	ount:		
\$52.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fee and Certified Copy	Certified Copy, and Certificate of Status	
STREET ADDRE	SS:	MAILING	ADDRESS:	
Registration Section		Registration	Section	
Division of Corpora	ations	Division of	Corporations	
Clifton Building		P. O. Box 63	327	
2661 Executive Cer	nter Circle	Tallahassee,	FL 32314	•

## CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

Y- .....

## DSA INVESTMENTS, 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 January 11, 1989, adopts the following certificate of amendment to its certificate of limited partnership.

FIRST: Amendment(s): (Indicate information being amended, added, or deleted)

The Limited Partnership does not have a General Partner. Pursuant to paragraph 15(b) of the Limited Partnership Agreement, JoAnd Smith, whose street address is 2044 Doomar Drive, Tallahassee, Florida 32303, and whose mailing address is Post Office Box 13663, Tallahassee, Florida 32317, has been appointed by the consent of the limited partners owning a majority of the rights to receive distributions as limited partners, to wind up the Limited Partnership's affairs (§620,1809, F.S. and §620,1803, F.S.)

SECOND: 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.)

LIMITED Signature(s) of a **SERVER** partner(s)\*: (\*Note: If adding or deleting an election to be a limited liability limited partnership statement, all general partners must sign the amendment.)

JOAJ D. SMITH

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Signature(s) of <u>new</u> or <u>dissociating</u> general partner(s), if any:

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

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