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Office Use Only



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10/19/10--01015--019 **52.50

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Endless Summer R.V. Estates, LLLP Name of Florida Limited Partnership or Limited Liability Limited Partnership	
Maine of Profida Emilied Fathership of Emilied Elability Emilied Fathership	
The enclosed Certificate of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to:	
Stuart Perlman	
Contact Forson	
Endless Summar R.V. Estatos HLLP Firm/Company	
401 S. Old Woodward, Ste 470 Address	
Burningham MI 48009 City, State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Stuart Perlman at (248) 258 - 8820 Name of Contact Person Area Code and Daytime Telephone Number	
Name of Contact Person Area Code and Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$52.50 Filing Fee S61.25 Filing Fee and Certificate of Status S105.00 Filing Fee \$113.75 Filing Fee, Certified Copy and Certificate of Status	
STREET ADDRESS: MAILING ADDRESS:	
Registration Section Registration Section	
Division of Corporations Division of Corporations	
Clifton Building P. O. Box 6327	
2661 Executive Center Circle Tallahassee, FL 32314	
Tallahassee, FL 32301	

SECRETARY OF STATE DIVISION OF CORPORATION

CERTIFICATE OF AMENDMENT TO

10 OCT 19 AM 9:58

CERTIFICATE OF LIMITED PARTNERSHIP OF

Endless Sum	ner R.V.	Estates	LLLP	
Insert name currently of	n file with Florida D	epartment of State		
Pursuant to the provisions of section 620.1202 limited liability limited partnership, whose cer 68/25/1989, assigned ladopts the following certificate of amendment	tificate was filed Florida document	with the Florida numberA	Department of	
This amendment is submitted to amend the followin	ıg:			
A. If amending name, <u>enter the new name of th</u> <u>here</u> :	e limited partner	ship or limited lia	bility limited p	artnership
New name must be disting	uishable and contain	an acceptable suffix	•	
Acceptable Limited Partnership suffixes: Limited Partne Acceptable Limited Liability Limited Partnership suffixe			, L.L.L.P. or LLL	Р.
B. If amending mailing address and/or prin principal office address here:	icipal office add	ress, <u>enter new i</u>	nailing addre	ss and/or
New Principal Office Address: (Muss be STREET address)				- - -
New Mailing Address: (May be post office box)			447.1	- -
C. If amending the registered agent and/or reg new registered agent and/or the new registered or			ds, <u>enter the n</u>	ame of the
Name of New Registered Agent:				-
New Registered Office Address:	Enter	Florida street addr	ess	-
		, Florida		_
	City		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 l
am familiar with and accept the obligations of my position as registered agent.

If Changing Registere	d Agent, Signal	ture of New Re	gistered Agent

D.	If a	mending	g the	general	partner(s),	<u>enter</u>	the	name	and	business	address	of	each.	general	partner	being
ado	ied o	r remov	ed fr	om our	records:											

<u>Title</u>	<u>Name</u>	Address	Type of Action
beneal <u>Partne</u> r	Sidney L. Cohn	6589 Pleasant LK. West Bloomfield, M. 4833	C≠·
		1.114.00	_ Add _ Remove
			Add Remove
			_ Add _ Remove
			_ Add _ Remove
			Add Remove
limited partnersh	partnership or limited liability ip" status, enter change here:		
This Limited	d Partnership hereby elects to be	a "Limited Liability Limited Pa	artnership."
This Limited	d Partnership hereby removes its	"Limited Liability Limited Par	tnership" status.
(NOTE: If adding or	r removing" limited liability limited pa	artnership" status, all general partn	ers must sign this amendment.)

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Effective date, if other than the date of filing: (Effective date cannot be prior to nor more than 90 days after the d		
(Effective date cannot be prior to nor more than 90 days after the d State.)	ate this document is filed by the Florida Depa	rtment of
Signature(s) of a general partner or all general partn	ers*:	
(*NOTE: Only one current general partner is required to sign this		
removing a "limited liability limited partnership" election statemen when adding or removing a "limited liability limited partnership" el	t. Chapter 620, F.S., requires all general partn lection statement.)	ers to sign
Stylant Verlman	and the state of t	0
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Signature(s) of all new or dissociating general partne	r(s), if any:	ATE
		Z
Sidney L. (ohn (DECEASED)		
		·
Filing Fee: \$52.50 Certified Copy (optional): \$52.50		