#690 P.001/004

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Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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(((H15000290953 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LIGHTSEY & ASSOCIATES, PA

Account Number: I20060000130 : (407)622-0025 Phone

: (407)386-7249 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

P/LLLP AMENDMENT/RESTATEMENT/CORRECTION AVALON ASSOCIATES OF DELAWARE LIMITED PARTNERSHIP

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$105.00

From: LIGHTSEY & ASSOCIATES PA

4076220026

12/09/2015 12:43

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CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

AVALON ASSOCIATES OF DELAWARE LIMITED PARTNERSHIP

Insert name currently on file with Florida Department of State

Pursuant to the provisions of section 620.1202, Flimited liability limited partnership, whose certific November 15, 1989, assigned Floring	ate was filed with the	he Florida Department of State on
adopts the following certificate of amendment to i	ts certificate of limit	ted partnership.
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the linere:	mited partnership or	limited liability limited partnership
New name must be distinguishe	ble and contain an acce	ptable suffix.
Acceptable Limited Partnership suffixes: Limited Partnershi Acceptable Limited Liability Limited Partnership suffixes: L		
B. If amending mailing address and/or princip principal office address here:	al office address, <u>e</u>	nter new mailing address and/or
New Principal Office Address: (Must be STREET address)		
New Mailing Address: (May be post office box)		
C. If amending the registered agent and/or register new registered agent and/or the new registered office		our records, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	Free Elector	
	Enier Florida	street address
	City	, Florida Zip Code

	Fram	:11	IGHTSEY	8	ASSOCIATES	PA
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12/09/2015 12:44

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FALLAHASSEE, FLORIDA

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>	Address	Type of Action
 	Marybel Defillo	3680 Avalon Park E. Blvd. Suite 300 Orlando, FL 32828	Add Remove
			Add Remove
			Add Remove
manufacture control to			Add Remove
			_
			_
E. If the limited p limited partnership	artnership or limited liability " status, enter change here:	limited partnership is amend	ling its "limited liabilit
This Limited	Partnership hereby elects to be	a "Limited Liability Limited Pa	rtnership."

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

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This Limited Partnership hereby removes its "Limited Liability Limited Partnership" status.

From: LIGHTSEY & ASSOCIATES PA

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FALLAHASSEE STATI

F. If amending any other information, enter	change(s) here: (Attach additional sheets, if necessary.)
ffective date, if other than the date of filing;	
iffective date cannot be prior to not more than 90 days af late.)	fter the date this document is filed by the Florida Department of
·	
<u>ignature(s) of a general partner or all general</u>	
moving a "limited liability limited partnership" election s	righ this document unless the limited partnership is adding or statement. Chapter 620, P.S., requires all general partners to sign
nen adding or removing a "limited liability limited partne	rship" election statement.) BKI ASSOCIATES, IN E
	By Beat Kahli, Pres
gnature(s) of all new or dissociating general r	partner(s), if any:
	(RECURETION IS AND
Marybel Dafillo	marybel petillo
7	
200	
ling Fee: \$52.50 ertified Copy (optional): \$52.50	
ertificate of Status (optional): \$8.75	