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Division of Corporations

Fax Number : (850)617-6383

From:

ACCOUNT Name : DEAN, MEAD, EGERTON, BLOODWCRTH, CAPOUANO & BOZARTH, P.A.

Account Number: 076077001702 Phone : (407)841-1200 Fax Number : (407)423-1831

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

Email Address:

LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION MARKER INVESTMENT PROPERTIES, LTD.

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S. YOUNG

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CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

Marker Investm	ent Proper	<u>ties, Ltd.</u>
Insert name currently on file	e with Florida De	epartment of State
Pursuant to the provisions of section 620.1202, Fl limited liability limited partnership, whose certific December 29, 1989, assigned Flor adopts the following certificate of amendment to it	ate was filed rida document	with the Florida Department of State on number A29451
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the linere:	mited partners	hip or limited liability limited partnership
Marker Investme	nt Propertie	es. LLLP
New name must be distinguished	able and contain	an acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Partnersh Acceptable Limited Liability Limited Partnership suffixes: I	ip, Limited, L.P., limited Liability I	LP, or Ltd. Limited Partnership, L.L.L.P. or LLLP.
B. If amending mailing address and/or princip principal office address here:	al office addi	ress, enter 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	red office addr address here:	ess on our records, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	Fuega	Florida street address
	Enter 1	ioniaa sireei aaaress
	City	, Florida

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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.

<u> Fitle</u>	ed from our records: Name	Address	Type of Action
		-	Add
			Add Remove
			DAAd
			Remove =
			Add Remove
			Remove

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

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F. If amending any other information, enter change(s)	nere: (Auden additional sneets, if necessary.)
· ————————————————————————————————————	
Effective date, if other than the date of filing:	te this document is filed by the Florida Department of
Signature(s) of a general partner or all general partne	<u>rs*:</u>
(*NOTE: Only one current general partner is required to sign this de removing a "limited liability limited partnership" election statement, when adding or removing a "limited liability limited partnership" elec-	Chapter 620, F.S., requires all general partners to sign
ALVIN C. MARKER	Olain C. marla
DEBRA MARKER BRUNO	Detra Marker Bruno
JOYCE MARKER DOBSON	Jone Marker Dobson
VICTOR C. MARKER	Vico C Make 38 30
	(a) (fame)
Signature(s) of all new or dissociating general partner	15), 11 any:
	CS Ling
Filing Fee: \$52.50	
Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	