

A31454

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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18 FEB -5 PM 4:20
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(For Office Use Only)

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Isla Del Sol Associates,LTD

(Name of Partnership)

DOCUMENT NUMBER: A31454

The enclosed Amendment to Partnership Statement and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mark Miller

(Name of Person)

Isla Del Sol Associated, LTD

(Firm/Company)

5218 W Neptune Way

(Address)

Tampa, FL 33609

(City/State and Zip Code)

mem@bayway.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mark Miller

(Name of Person)

At (813) 786-3999

(Area Code) (Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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01/22/18--01022--001 **25.00



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 24, 2018

MARK MILLER
5218 W NEPTUNE WAY
TAMPA, FL 33609

SUBJECT: ISLA DEL SOL ASSOCIATES, LTD.
Ref. Number: A31454

RECEIVED
FEB 05 2018

We have received your document for ISLA DEL SOL ASSOCIATES, LTD. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is a balance due of \$27.50.

The form you submitted is for a General Partnership, but your entity is a Florida Limited Partnership. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons
Regulatory Specialist II

Letter Number: 218A00001486

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Isla Del Sol Associates, 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:

Mark Miller
Contact Person

Bayway Investment Properties, Inc.
Firm/Company

5218 W. Neptune Way
Address

Tampa, FL 33609
City, State and Zip Code

mm@bayway.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mark Miller at (813) 786-3999
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$52.50 Filing Fee ☐ \$61.25 Filing Fee and Certificate of Status ☐ \$105.00 Filing Fee and Certified Copy ☐ \$113.75 Filing Fee, Certified Copy, and Certificate of Status

STREET ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

\$27.50
to
supplement
prior
sum paid.
of \$25.00

CERTIFICATE OF AMENDMENT
TO
CERTIFICATE OF LIMITED PARTNERSHIP
OF

ISLA DEL SOL ASSOCIATES, 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 Apr. 18, 1991, assigned Florida document number A31454, adopts the following certificate of amendment to its certificate of limited partnership.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited partnership or limited liability limited partnership here:

N/A

New name must be distinguishable and contain an acceptable suffix.

Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.

Acceptable Limited Liability Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P., or LLLP.

B. If amending mailing address and/or principal office address, enter new mailing address and/or principal office address here:

New Principal Office Address:
(Must be STREET address)

N/A

New Mailing Address:
(May be post office box)

C. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

N/A

New Registered Office Address:

Enter Florida street address

City, Florida

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 I am familiar with and accept the obligations of my position as registered agent.

N/A
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>	<u>Address</u>	<u>Type of Action</u>
General Partner	Bayway Management, Inc	5218 W. Neptune Way TAMPA, FL 33609	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
General Partner	Bayway Investment Properties, Inc	5218 W. Neptune Way TAMPA, FL 33609	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

N/A

- ☐ This Limited Partnership hereby elects to be a "Limited Liability Limited Partnership."
- ☐ This Limited Partnership hereby removes its "Limited Liability Limited Partnership" status.

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

F. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

N/A

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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Signature(s) of a general partner or all general partners*:

(*NOTE: Only one current general partner is required to sign this document unless the limited partnership is adding or removing a "limited liability limited partnership" election statement. Chapter 620, F.S., requires all general partners to sign when adding or removing a "limited liability limited partnership" election statement.)

Removed General Partner

Bayway Management, Inc.

By: _____

Mark E. Miller

its Vice President

10 FEB - 7 PM 4:25

Signature(s) of all new or dissociating general partner(s), if any:

Added General Partner

Bayway Investment Properties, Inc.

By: _____

Mark E. Miller

its Vice President

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