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Certified Copies	Certificates	of Status
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DEPARTHENT OF STATE DIVISION OF CORPURATIONS TALL AND SSEE FLORIDA RECEIVED

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SECRETARY OF STATE DIVISION OF CORPORATIONS

B. KOHR NOV 1 0 2010

EXAMINER

COVER LETTER

то:	Registration Division of C			6
SUBJ			mily Partners, Ltd.,	
The er	nclosed Certifi	cate of Amendment a	nd fee(s) are submitted	for filing.
Please	return all cor	respondence concerni	ng this matter to:	
		Stuart Goldberg		
			D .	
	Law Office	s of Stuart E. Goldb	erg, P.L.	
		Firm/Company		
	P(ost Office Box 12458	<u> </u>	
		Address		
		Tallahassee, FL		
-		City, State and Zip Code		
E-	-mail address: (to	be used for future annual	report notification)	
For fu	rther informat	ion concerning this m	atter, please call:	
	Stuart	Goldberg	at (850)	222-4000
	Name of Conta	act Person		time Telephone Number
Enclos	sed 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	\$113.75 Filing Fee, Certified Copy, and Certificate of Status
STRE	ET ADDRES	SS:	MAILING A	ADDRESS:
	ration Section		Registration	
Division of Corporations		Division of Corporations		
Clifton Building		P. O. Box 6327 Tallahassee, FL 32314		
2661 Executive Center Circle Tallahassee, FL 32301		i ananassee,	FL 34314	

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

LOWN OM STATION

Smith Family	<u>r Partners,</u>	Ltd.	, LLLP
cart name currently on	file with Florid	la Dana	etment of Sta

	orida Statutes, this Florida limited partnership or cate was filed with the Florida Department of State on rida document number
adopts the following certificate of amendment to i	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the libere:	mited partnership or limited liability limited partnership
New name must be distinguished	able and contain an acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Partnersh Acceptable Limited Liability Limited Partnership suffixes: L	
B. If amending mailing address and/or princip principal office address here:	oal office address, 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 registenew registered agent and/or the new registered office	red office address on our records, enter the name of the eaddress here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	City Zin 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.

	If Changing Registered Agent, Signature of New Registered Agent
 	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
<u>GP</u>	Irene W. Smith	7626 Buck Lake Road Tallahassee, FL 32317	Add Remove
GP	Douglas C. Smith	1080 Commerce Blvd. Midway, FL 32343	Add Remove
<u>GP</u>	Robert L. Smith	2222 Pontiac Drive Tallahassee, FL 32302	Add Remove
			Add Remove
			Add Remove
			Add Remove
	partnership or limited liability p" status, enter change here:	y limited partnership is amen	iding its "limited liability
This Limited	Partnership hereby elects to be	a "Limited Liability Limited P	artnership."
This I imited	Dartnarchin haraby ramayas its	"I imited I ighility I imited Pa	rtnorchin" ctatue

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

F. If amending any other information, en	ter change(s) here: (Attach additional sheets, if necessary.)
·	
Effective date, if other than the date of filing: (Effective date cannot be prior to nor more than 90 da State.)	: ays after the date this document is filed by the Florida Department of
Signature(s) of a general partner or all gen	neral partners*:
(*NOTE: Only one current general partner is require removing a "limited liability limited partnership" elect when adding or removing a "limited liability limited partnership" elect when adding or removing a "limited liability limited partnership" elect when adding or removing a "limited liability limited partnership".	d to sign this document unless the limited partnership is adding or tion statement. Chapter 620, F.S., requires all general partners to sign partnership" election statement.)
part -	
Signature(s) of all new or dissociating gene	eral partner(s), if any:
James W Smith	,
Kust	
De Sutet	
Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	