

A930000000069

Requestor's Name	
P.O. Box 1844	
Address	
Mt. Dora, FL	32756
City/State/Zip	Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____ (Corporation Name) _____ (Document #)
2. _____ (Corporation Name) _____ (Document #)
3. _____ (Corporation Name) _____ (Document #)
4. _____ (Corporation Name) _____ (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
	Profit
	NonProfit
	Limited Liability
	Domestication
	Other

AMENDMENTS	
	Amendment
	Resignation of R.A., Officer/ Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

OTHER FILINGS	
	Annual Report
	Fictitious Name
	Name Reservation

REGISTRATION/ QUALIFICATION	
	Foreign
	Limited Partnership
	Reinstatement
	Trademark
	Other

Name	MTH
Availability	MTH
Document Examiner	MTH
Updater	MTH
Updater Verifier	MTH
Acknowledgement	MTH
vr. P. Verifier	MTH

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DIVISION OF CORPORATIONS
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Examiner's Initials

**LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED
OFFICE OR REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes, the undersigned limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. PROPHECY COUNTDOWN PARTNERS SERIES I, LTD
Name of the limited partnership

2. 01/06/93 3. A93000000069
Date of filing/registration in Florida Document number assigned

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Edwards, Patricia a.
Name
1701 Robie Ave.
Address
Mt. Dora, FL 32757
City, State and Zip

5. The name and address of the new registered agent and/or office:

Dianne Osborne
Name
1701 Robie Ave.
Florida street address (P.O. Box **not** acceptable)
MT. Dora FL 32757
City, State and Zip

6. Such change(s) was/were authorized by the general partners.

Dianne Osborne as President
Signature of General Partner

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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the limited partnership has been notified in writing of this change.

Dianne Osborne as President
Signature of Registered Agent

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Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
Filing Fee: \$35.00