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| (Re | questor's Name) | , |
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| PICK-UP | ☐ WAIT | MAIL |
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| (Do | ocument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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COVER LETTER

| TO: | Registration Division of 0 | Section Corporations | | | | |
|---------------------------------------|--|--|--------------|--|--|----------------------------------|
| SUBJ | ECT: | The Kosie | | | | |
| | N | ame of Florida Limited Pa | ırtnership o | r Limited Lial | bility Limited Par | tnership |
| The en | nclosed Certif | icate of Amendment a | and fee(s) | are submit | ted for filing. | |
| Please | e return all cor | respondence concerni | ing this m | natter to: | | |
| | Gail Kosie | r Neuharth, Genera | ıl Partne | <u>r</u> | | |
| | | Contact Person | | | | |
| | | Firm/Company | | | | |
| | 7612 L | ake Vista Court, Ur | nit 206 | | | |
| | | Address | | | | 三台 |
| | | wood Ranch, FL 34 | 1202 | | | 監論量で |
| | (| City, State and Zip Code | | | | 126 |
| ··· | | Ineuharth@gmail.co | | | | 1 |
| Е | -mail address: (to | be used for future annua | l report not | ification) | | |
| For fu | orther informat | ion concerning this m | natter, ple | ase call: | | PN 4: 27 OF STAIR F, NORDA |
| | | ier Neuharth | at (| 239)_ | 298-3 | |
| | Name of Conta | act Person | Aı | ea Code and I | Daytime Telephor | ne Number |
| Enclo | sed is a check | for the following amo | ount: | | | |
| \$52 | .50 Filing Fee | \$61.25 Filing Fee and Certificate of Status | | 5.00 Filing Feathfiled Copy | Certificate | Copy, and |
| Regist Divisi Cliftor 2661 I | tration Section fon of Corpora n Building Executive Cen nassee, FL 323 | tions ter Circle | | Registrati Division of P. O. Box Tallahasso | G ADDRESS fon Section of Corporation 6327 ee, FL 32314 | s |

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

| | r Family Partners | | | - |
|---|--|--|-------------------------------|------------------|
| | , | ., | | |
| Pursuant to the provisions of section 620. limited liability limited partnership, whose 1/3/14; 5/13/14; 2/22/16, assig | e certificate was filed ned Florida documen | with the Florida De t numberA9 | epartment of 9 94000000006 | State on |
| adopts the following certificate of amendr | nent to its certificate | of limited partnersh | ip. | |
| This amendment is submitted to amend the fol | lowing: | | | |
| A. If amending name, <u>enter the new name</u> here: | of the limited partner | ship or limited liabi | lity limited pa | <u>rtnership</u> |
| New name must be d | stinguishable and contain | an acceptable suffix. | | |
| Acceptable Limited Partnership suffixes: Limited a Acceptable Limited Liability Limited Partnership a | | | .L.L.P. or LLLP | |
| B. If amending mailing address and/or principal office address here: | principal office add | lress, <u>enter new ma</u> | iling addres | s and/or |
| New Principal Office Addre | ess: 7612 Lake | Vista Court, Unit 2 | 206 | |
| (Must be STREET address) | Lakewood | Ranch, FL 34202 | · | |
| New Mailing Address: (May be post office box) | | Vista Court, Unit 2 Ranch, FL 34202 | | |
| C. If amending the registered agent and/o new registered agent and/or the new registe | | | , enter the m | me of the |
| Name of New Registered Agent: | | | 1/13 1/13 1/13 | 3 |
| New Registered Office Address: | 7612 Lake Vista 0 | | | |
| | Enter | Florida street addres. | | |
| | Lakewood Ra | , . 1011000 | 34202 | 7 |
| | City | | 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. |

If Changing Registered Agent, Signature of New Registered Agent

| D. | If amending the general | partner(s), en | iter the n | ame and | business | address | of each | general | partner | being |
|------------|-------------------------|----------------|------------|---------|----------|---------|---------|---------|---------|-------|
| <u>ado</u> | led or removed from our | records: | | | | | | | | |

| <u>Title</u> | Name | Address | Type of Action |
|--------------|---|---|-----------------------------|
| | Gail Kosier Neuharth | 7612 Lake Vista Court Unit 206 Lakewood Ranch, FL 34202 | Add Remove |
| | Gail Kosier Neuharth Trustee Kooier Bypass Trust | 239 Colonade Circle Naples, FL 34103 | Add Remove |
| | | | Add Remove |
| | | | Remove T |
| | | | Remove = |
| | | | Add 21 |
| | partnership or limited liability p" status, enter change here: | limited partnership is amend | ling its "limited liability |
| This Limited | Partnership hereby elects to be | a "Limited Liability Limited Par | rtnership." |

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

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

| Effective date, if other than the date of filing: Effective date cannot be prior to nor more than 90 days after state.) | er the date this document is filed by the Florida Department of |
|--|---|
| Signature(s) of a general partner or all general p | partners*: |
| *NOTE: Only one current general partner is required to sig emoving a "limited liability limited partnership" election sta when adding or removing a "limited liability limited partners" | atement. Chapter 620, F.S., requires all general partners to sign |
| Sail Lodger Mucharth | |
| And Joseph Phicharth | |
| 1-4A | |
| | |
| | |
| Signature(s) of all new or dissociating general pa | artner(s), if any: |
| | |
| Dail Kassis Newhart | NEW SE ZO |
| by Konin Genhard Trustee | DISSOCIATING GENERAL PARTH |
| Kosier Bypass Trust | 第32 長 |
| | <u> </u> |
| | |
| | |
| Filing Fee: \$52.50 | |