Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000246077 3)))



H230002460773ABC+

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COMPUTERSHARE
Account Number : 110432003053
Phone : (561)694-8107
Fax Number : (561)214-8442

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an	nual	report	mailin	gs.	Enter	only one	email	add.	res	s ple	ase.	** [

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LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION PEELOR PARTNERS, LTD.

 Certificate of Status
 0

 Certified Copy
 0

 Page Count
 06

 Estimated Charge
 \$52.50

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Electronic Filing Menu

Corporate Filing Menu

T. LEMIEUX dlaH

COVER LETTER

TO:	Registration 5 Division of C			
SUBJ	ECT:	eelor Partners, Ltd.		
5525		me of Florida Limited Partr	nership or Limited L	iability Limited Partnership
The er	nclosed Certific	cate of Amendment and	d fec(s) are subm	itted for filing.
Please	return all corr	espondence concerning	g this matter to:	
Melani	e Roosa, Paralega	ıl		
		Contact Person		
Catania	a, Mahon & Rider	PLLC		
		Firm/Company		
641 Br	oadway			
		Address	****	
Newbu	rgh NY 12550			
	C	ity, State and Zip Code		
	a@cmrlaw.com			
E-	-mail address: (to	be used for future annual re	port notification)	
For fu	rther information	on concerning this mat	ter, please call:	
Mclani	e Roosa		_at (565-1100
	Name of Contac	t Person	Area Code and	Daytime Telephone Number
Enclos	sed is a check f	or the following amou	nt:	
\$ 52.	50 Filing Fee	☐\$61.25 Filing Fee and Certificate of Status	\$105.00 Filing I and Certified Copy	
Regist Division P.O. B	ng Address: ration Section on of Corporati lox 6327 assee, FL 3231		Registra Division The Cer 2415 N.	address: ation Section of Corporations atre of Tallahassee Monroe Street, Suite 810 assee, FL 32303

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

	R PARTNERS, LTD.		
Insert name currently on fi	le with Florida Depar	tment of State	
Pursuant to the provisions of section 620.1202, F limited liability limited partnership, whose certificate of amendment to	cate was filed wit orida document nu	h the Florida Department of State mber <u>A94000000498</u>	,
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the l	imited partnership	or limited liability limited partne	<u>rship</u>
New name must be distinguish	nable and contain an a	cceptable suffix.	
Acceptable Limited Partnership suffixes: Limited Partnersh Acceptable Limited Liability Limited Partnership suffixes:			
B. If amending mailing address and/or principal office address here:	pal office address	, enter new mailing address an	<u>d/or</u>
New Principal Office Address: (Must be STREET address)		2623	
New Mailing Address: (May be post office box)		 	
C. If amending the registered agent and/or registered registered agent and/or the new registered office ad	ed office address or <u>dress here</u> :	N	<u>e new</u>
Name of New Registered Agent:		 	
New Registered Office Address:	Enter Flor	ida street address	
	City	, Florida Zip Code	

O 07/13/2023 11:39 AM 15612148442 → 18506176383 pg 5 of 6

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 Ager	nt, 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>	Address	Type of Action
	James R. Peclor	105 Barmore Road LaGrangeville NY 12540	☐ Add ☐ Remove
	James M. Peelor	105 Barmore Road LaGrangeville NY 12540	☐ Add ☐ Remove
	Peelor Partners GP, LLC	105 Barmore Road LaGrangeville NY 12540	_ ■ Add _ □ Remove
			☐ Add☐ Remove
			☐ Add☐ Remove
			_

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

This Limited Partnership hereby elects to be a "Limited Liability Limited Partners	ırtnership."	y Limited	Liability	"Limited	v elects to be a	o hereb	d Partnershi	This Limited	
--	--------------	-----------	-----------	----------	------------------	---------	--------------	--------------	--

(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.

F. If amending any other info	rmation, e	nter change(s) bere:	(Attach addit	ional sheets, if	necessary.)
			·		-	
						<u>.</u>
		, ————————				
	<u> </u>					
more at a talk to the state of			<u>., </u>			
Effective date, if other than the dat (Effective date cannot be prior to nor mor			ate this do	cument is file	d by the Florida	Department o
State.) Note: If the date inserted in this block doc	es not meet	the applicable	statutory	filing requires	nents, this date w	rill not
be listed as the document's effective date	on the Dep	artment of Stat	e's record	J.		
Signature(s) of a general partner	or all ge	neral partn	ers*:			
"NOTE: Only one current general partners removing a "limited liability limited partners when adding or removing a "limited liabil	ership" ele	ction statement	. Chapter	620, F.S., req	ited partnership uires all general	is adding or partners to si
Peelor Partners GP, LLC, General P						
y: Kubua Leelar Barbara Poelor, Executrix of the Estate of		or es				
Sole Member of General Partner						
					_	
		. •	-62.46-			
Signature(s) of all new or dissocia	ating gen	erat partne	<u> </u>	<u>n</u> y:		
				· ·· <u>·</u> ·		
					_	
			•			
Filing Fee:	\$52.50					
Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$8.75					