

A94000000592

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

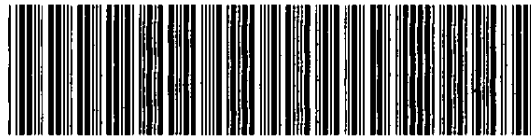
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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M. THOMAS

JAN - 5 2010

EXAMINER

SHIPLEY LAW FIRM

ATTORNEY AT LAW
131 WATERMAN AVENUE
MOUNT DORA, FLORIDA 32757-9541

WWW.SHIPLEYLAW.ORG

CHRISTOPHER J. SHIPLEY, ESQ., MBA, CPA
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TELEPHONE: (352) 383-3397
FACSIMILE: (352) 383-1364

December 29, 2009

Florida Department of State
Division of Corporations
Partnership Section
Post Office Box 6327
Tallahassee, Florida 32314

Re: Crouse Family Limited Partnership
Document Number A94000000592

Dear Clerk:

Enclosed for filing is a Certificate of Amendment to Certificate of Limited Partnership form necessary to remove Terry Crouse, Michael Crouse, and Steven L. Crouse from any association regarding the above-referenced Limited Partnership. Also enclosed is our check in the amount of \$52.50 to cover the cost of the amendment.

Please call with any questions you may have.

Very truly yours,



Tony Justice, Paralegal to
Christopher J. Shipley

/tj

Enclosures

cc: Carl E. Crouse

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TALLAHASSEE, FLORIDA

**CERTIFICATE OF AMENDMENT
TO
CERTIFICATE OF LIMITED PARTNERSHIP
OF**

Crouse Family Limited Partnership

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 04/07/1997, assigned Florida document number A94000000592, 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:

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 Limited 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)

New Mailing Address:

(May be post office box)

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TALLAHASSEE, FLORIDA

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:

New Registered Office Address:

Enter Florida street address

_____, Florida _____
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), 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>
_____	Terry Crouse	11129 Oakshore Lane Clermont, Florida 34711	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
_____	Michael Crouse	1477 Lakemist Lane Clermont, Florida 34711	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
_____	Steven L. Crouse	14630 Pine Lake Street Clermont, Florida 34711	<input type="checkbox"/> Add <input checked="" 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

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STATE
FLORIDA

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 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.)

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.)

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.)

Carl E. Crouse
Carl E. Crouse

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

Terry Crouse
Terry Crouse
Michael Crouse
Michael Crouse
Steven L. Crouse
Steven L. Crouse

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TALLAHASSEE, FLORIDA

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