## A9400000 1242

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SECRETARY OF STATE TALLAHASSTE, FLORIDA

## **COVER LETTER**

Division of C				
SUBJECT: 4-M Prop	erties, LP			
Nai	ne of Florida Limited Part	nership or Limited L	iability	Limited Partnership
The enclosed Certific	cate of Amendment an	d fee(s) are subn	nitted fo	or filing.
Please return all corr	espondence concernin	g this matter to:		·
Thomas M Dryden			_	
	Contact Person			
Thomas M Dryden, PL			_	
	Firm/Company			
1705 Colonial Blvd. B-3			_	
	Address			
Fort Myers, FL 33907				
	City, State and Zip Code	-	<del>-</del>	
billm@fireserviceusa.c	om			
E-mail address: (to	be used for future annual	report notification)	_	
For further information	ion concerning this ma	ntter, please call:		
Thomas Dryden		at ( <sup>239</sup>	337-20	001
Name of Conta	ct Person	_ \	nd Dayti	me Telephone Number
Enclosed is a check	for the following amo	unt:		
\$52.50 Filing Fee	□\$61.25 Filing Fee and Certificate of Status	\$105.00 Filing and Certified Co	_	S113.75 Filing Fee, Certified Gopy, and Certificate of Status
STREET ADDRESS:		MAIL	ING A	ADDRESS:
Registration Section		Registration Section		
Division of Corporations		Division of Corporations P. O. Box 6327		
Clifton Building 2661 Executive Center Circle		Tallahassee, FL 32314		
Tallahassee, FL 323				

## CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

4-M Properties, LP			
Insert name currently or	n file with Florida Departi	nent of State	
	tificate was filed with Florida document nun	the Florida Department on the A94000001242	
adopts the following certificate of amendment	to its certificate of lin	nited partnership.	
This amendment is submitted to amend the following	ıg:		į
A. If amending name, enter the new name of the here:	ne limited partnership	or limited liability limited j	partnership
New name must be distingu	uishable and contain an ac	ceptable suffix.	
Acceptable Limited Partnership suffixes: Limited Partne Acceptable Limited Liability Limited Partnership suffix			.P.
B. If amending mailing address and/or pringing principal office address here:	ncipal office address,	, enter new mailing addre	ess and/or
New Principal Office Address: (Must be STREET address)			
New Mailing Address: (May be post office box)		PECT 27	
C. If amending the registered agent and/or reg		on our records, enter threat	lame of the
new registered agent and/or the new registered o	ffice address here:	DA DA	
Name of New Registered Agent:			 - <del> </del>
New Registered Office Address:	Enter Flor	ida street address	  - 
	City	Florida Zip Cod <b>e</b>	-

## New Registered Agent's Signature, if changing Registered Agent:

		It Changing Daviet, as I A saw	Signature of New Registered
		it Changing Registered Agen	i. Signature of New Registered
mending <u>r remov</u> e	the general partner(s), ed from our records:	enter the name and business addre	ss of each general partne
<u>tle</u>	<u>Name</u>	<u>Address</u>	Type of Action
			□ Add □ Remove
<del></del>			
	<del> </del>		☐ Add☐ Remove

(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.

in the limited partnership to Arreca Limit	ted, a company incorp	porated under the laws of Jersey	in the Channel Islands	
and 49% interest to Cedar Enterprises Lin	nited, a company inco	orporated under the laws of Jer	sey in the Channel Island	ls
Effective date, if other than the date				<del></del>
(Effective date cannot be prior to nor more State.) Note: If the date inserted in this block doe		·	•	t of
be listed as the document's effective date of	on the Department of	State's records.	is, this date will not	
Signature(s) of a general partner	or all general na	rtnare*•	1	
		<del>-</del>	7 7 7 7 7 7 7 7	
(*NOTE: Only one current general partner removing a "limited liability limited partner."	ership" election stater	nent. Chapter 620, F.S., requir	d partnership is acting or es all general partners to	r sign
when adding or removing a "limited liabili	ity limited partnership	o" election statement.)	ASS	
4M Management, LLC, General Partner			A A	• 1
	<del></del>			Land
By William Made Th	inga.		DRII.	
		<del></del>	<u>l</u>	_
Signature(s) of all new or dissocia	nting general nar	tnor(c) if any	i	
Significant of the state of the	ittig general par	mer(s), ii any.		
	<del></del>			
		<del></del>		
		<del></del>		
	\$52.50 \$53.50			
Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$8.75			