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EXAMINER



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SECRETARY OF STATE

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: FUTRAL INVES							
Name of Florida Limited Pa	artnership or Limited Liability Limited Partnership						
The enclosed Certificate of Amendment and fee(s) are submitted for filing.							
Please return all correspondence concerning this matter to:							
WILLIAM J FUTRAL							
FUTRAL INVESTMENTS, LIMITED Firm/Company							
19 HEIGHTS AVE	ENUE						
FROSTPROOF FL	<i>3384</i> 3						
City, State and Zip Code Tefffut nale Verizon.net E-mail address: (to be used for future annual report notification)							
For further information concerning this m	atter, please call:						
Robley J. FUTRAL Name of Contact Person	at (<u>863</u>) <u>635-4548</u> Area Code and Daytime Telephone Number						
Enclosed is a check for the following amount:							
\$52.50 Filing Fee S61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fee and Certified Copy Certified Copy, and Certificate of Status						
STREET ADDRESS:	MAILING ADDRESS:						
Registration Section	Registration Section						
Division of Corporations	Division of Corporations						
Clifton Building	P. O. Box 6327						
2661 Executive Center Circle	Tallahassee, FL 32314						
Tallahassee, FL 32301							

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

	Or	
FUTRAL INVE	STMENTS, LIMITED	
Insert name currently on f	file with Florida Department of State	
Pursuant to the provisions of section 620.1202, I limited liability limited partnership, whose certificate of amendment to	ficate was filed with the Florida Department of orida document number	nip or of State on 1637,
This amendment is submitted to amend the following:	:	
A. If amending name, enter the new name of the here:	limited partnership or limited liability limited	<u>partnershir</u>
New name must be distinguis	shable and contain an acceptable suffix.	
Acceptable Limited Partnership suffixes: Limited Partners Acceptable Limited Liability Limited Partnership suffixes.		LP.
B. If amending mailing address and/or princ principal office address here:	ipal office address, <u>enter new mailing addı</u>	ress and/or
New Principal Office Address: (Must be STREET address)		
New Mailing Address: (May be post office box)		
C. If amending the registered agent and/or regis new registered agent and/or the new registered off		name of the
Name of New Registered Agent:		_
New Registered Office Address:	First Elevida atreas address IC	<u> </u>
	Enter Florida street address	PR TI
	City Zip Gode	

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), <u>enter</u>	the r	name	and	business	address	of	each	general	partner	being
<u>adc</u>	led or removed from our records:											

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
	Robert H. Fu		Add Remove
		19HEIGHTS AVE FROSTPROOF, FL 3	33843
			Add Remove
			Add Remove
			Add Remove
			
E. If the limite limited partner	ed partnership or limited ship" status, enter change	liability limited partnership is a	amending its #Mitted Plability ARRY
This Limi	ited Partnership hereby ele	cts to be a "Limited Liability Limi	` t
This Limit	ited Partnership hereby rer	noves its "Limited Liability Limite	ed Partnership
		limited partnership" status, all general	

F. If amending any other inform			
Removal of 1 as GENERAL	Partner.	He is	ACCEASED.
Effective date, if other than the date (Effective date cannot be prior to nor more State.)	of filing:e than 90 days after the dat	e this document is fil	ed by the Florida Department of
Signature(s) of a general partner		·	
(*NOTE: Only one current general partne removing a limited liability limited partne when adding or removing a "limited liability limited l	ership" election statement.	Chapter 620, F.S., restion statement.)	mited partnership is adding or equires all general partners to sign
Signature(s) of all new or dissocia	ting general partner(s), if any:	
William Jeffrey Futer	J, G Trustee	,	
		· · · · · · · · · · · · · · · · · · ·	
•	\$52.50 \$52.50 \$8.75		