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Division of Corporations

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/LLLP AMENDMENT/RESTATEMENT/CORRECTION SCANLON FAMILY LIMITED PARTNERSHIP

Certificate of Status	0
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Page Count	04
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G. MCLEOD

EXAMINER

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PAR'INERSHIP OF

Scanion Insert name corres	Family Limited	Partnersip				
Insert name carrently on file with Florida Department of State Pursuant to the provisions of section 620.1202, Florida Statutes, this Florida limited partnership or imited liability limited partnership, whose certificate was filed with the Florida Department of State on 06/09/1995, assigned Florida document number A95000000863,						
adopts the following certificate of amenda		e of limited partner	rship,			
This amendment is submitted to amond the foll	lowing:					
A. If amonding лате, <u>enter the new пато</u> nere:	of the limited partn	ershin or limited lia	bility limited 1	o <u>artnerah</u> i	<u>ip</u>	
New name must be di	stinguishable and conta	in an acceptable suffix				
Acceptable Limited Partnership suffixes: Limited I Acceptable Limited Liability Limited l'artnership s	² artnership, Limited, L. uffixes: Limited Liabili	P., LP, or Ltd. ty Linited Partnership	, L.L.P. or LLL	.P.		
 If amending mailing address and/or principal office address here: 	principal office ad	ldress, <u>enter new</u>	nailing addre	ess and/o	ŗ	
New Principal Office Addre (Must be STREET address)	<u></u>			 	•	
New Mailing Address: (May be post office bax)				<u>-</u>		
C. If amending the registered agent and/or two registered agent and/or the new registered	' registered office ad ed office address he	idress on our record	ds, <u>enter the n</u>	aine of th	Ę	
Name of New Registered Agent:	*			- -		
Now Registered Office Address:	Ente	er Florida street addr Plorida		SECRE ALL'AH	TT APR	
	City	, Florida	Zip Code	SECRETARY OF ST	APR -7 AH 9:	
	Page 1 of 3			ATE	=	-

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 duttes, 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	cach general	partner being
<u>ad</u>	<u>led ar removed from our i</u>	records;	· -				

<u>Title</u>	Name	Address	Type of Action
	Joan M. Scanjon	4805 Griffin Bouleyard Ft. Myers FL 33908	Add Remove
	John E. Scanlon	4805 Griffin Boulevard Ft. Myers, FL 33908	Add Remove
	John E.C. Scanlon	c/o Fort Myers Lincoln Mercury 14270 South Tamiami Trial F), Myers, FL 93912	Add R¢moye
			Add Remove
			Add
			Add Remove
f the limited p	artnership or limited liability	limited partnership is among	ling its "limited li

ability

Ш	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.)

	nange(s) here: (Attach additional sheets, if necessary.)
Effective date, if other than the date of filing:	r the date this document is filed by the Florida Department of
Signature(s) of a general partner or all general	<u>partners*;</u>
(*NOTE: Only one current general partner is required to sig removing a "limited liability limited partnership" election sta when adding or removing a "limited liability limited partners	stement. Chapter 620, F.S., requires all general pariners to si
710011	
dohn E.C. Scaniga	
Signaturo(s) of all new or dissociating general pa	artner(s), if any:
insplication and insplication	John E. Scanlon
Lakel -	00/12.000/10/1
John E.C. Scanlon	
Fitling Fee: \$52.50	
Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	