

A96000001359

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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AUG 12 2014
J. HARRIS

GUTTENMACHER, BOHATCH & PEÑARANDA, P.A.

ATTORNEYS AT LAW

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BUSINESS PLANNING & TAXATION

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KEY WEST, FLORIDA 33040

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PLEASE REPLY TO:
SOUTH MIAMI

August 4, 2014

Via CMRRR

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: The Lee Family Limited Partnership - Reinstatement and Amendment

To whom it may concern:

Enclosed please find the following documents regarding the above referenced Partnership:

1. Limited Partnership Reinstatement Form; and
2. Certificate of Amendment.

Also, enclosed you will find the following two (2) checks payable to the Florida Dept. of State, Division of Corporations:

1. Check no. 142 in the amount of Two Thousand Dollars (\$2,000.00) for the filing of the Reinstatement of the Lee Family Limited Partnership; and
2. Check No. 141 in the amount of Sixty-One Dollars and Twenty-Five Cents (\$61.25) for the filing of the Certificate of Amendment.

Please return the certificate of status to me once the forms above are processed. Thank you.

Should you have any questions, please do not hesitate to contact me.

Sincerely,

GUTTENMACHER, BOHATCH
& PEÑARANDA, P.A.


JOHN S. BOHATCH, ESQ.

Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: THE LEE FAMILY LIMITED PARTNERSHIP
Name of Florida Limited Partnership 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:

John S. Bohatch, Esquire

Contact Person

Guttenmacher, Bohatch & Penaranda, P.A.

Firm/Company

7301 SW 57th Court, Suite 560

Address

South Miami, Florida 33143

City, State and Zip Code

jbohatch@gbptaxlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John S. Bohatch

Name of Contact Person

at (305)

666-1040

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$52.50 Filing Fee

☒ \$61.25 Filing Fee
and Certificate of
Status

☐ \$105.00 Filing Fee
and Certified Copy

☐ \$113.75 Filing Fee,
Certified Copy, and
Certificate of Status

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

**CERTIFICATE OF AMENDMENT
TO
CERTIFICATE OF LIMITED PARTNERSHIP
OF
THE LEE 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 07/22/1996, assigned Florida document number A96000001359, 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)

Ms Margaret MacLeod
124 Buttercup Lane
Huntington, NY 11743

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>
GP	Margaret Lee MacLeod	124 Buttercup Lane Huntington, NY 11743	<input checked="" 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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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DIVISION OF CORPORATIONS

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.

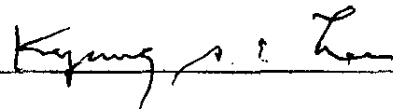
(NOTE: If adding or removing "limited liability limited partnership" status, all general partners must sign this amendment.)

F. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

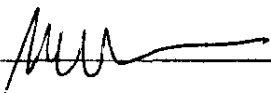
Effective date, if other than the date of filing: _____
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

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, P.S., requires all general partners to sign when adding or removing a "limited liability limited partnership" election statement.)

 _____

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

 _____

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DIVISION OF CORPORATIONS
16 AUG - 7 PM 1:13

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