A9600001880

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(Addres	SS)	
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(City/St	ate/Zip/Phone #)	_
PICK-UP	WAIT MAIL	
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(Busine	ess Entity Name)	_
(Docum	nent Number)	
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Special Instructions to Filin	ng Officer:	

Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations

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December 5, 2014

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JACOB DYKXHOORN PETERSON & MYERS, P.A. P.O. BOX 1079 LAKE WALES, FL 33859-1079

SUBJECT: CHARLIE N. LONG, JR. AND EDNA G. LONG FAMILY LIMITED

PARTNERSHIP

Ref. Number: A9600001880

We have received your document for CHARLIE N. LONG, JR. AND EDNA.G., LONG FAMILY LIMITED PARTNERSHIP and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a current general partner, if any, and by each newly designated general partner(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammi Cline Regulatory Specialist II

Letter Number: 114A00025661

COVER LETTER

Division of	Corporations			
		Edna G. Long Family		
N	ame of Florida Limited Pa	rtnership or Limited Liabilit	y Limited Partnership	,
The enclosed Certif	icate of Amendment a	and fee(s) are submitted	for filing.	
Please return all con	respondence concerni	ng this matter to:		
	acob C. Dykxhoorn			
	Contact Person			
Pe	eterson & Myers, P.A	١,		F
	Firm/Company			
	P.O. Box 1079			A B
	Address			哲学 万
Lake	Wales, FL 33859-1	079		
	City, State and Zip Code			33 F
Ср	hc@tampabay.rr.co	m		를
	o be used for future annua			
For further informa	tion concerning this m	natter, please call:		
Jacob C	Dykxhoom	_at (863)_	676-7611	
Name of Cont	act Person	Area Code and Day	time Telephone Num	ber
Enclosed is a check	for the following amo	ount:		
\$52.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status	\$105,00 Filing Fee and Certified Copy	\$113.75 Filing Certified Copy, an Certificate of State	ıd
STREET ADDRE	SS:	MAILING .	ADDRESS:	
Registration Section		Registration		
Division of Corpora	ations		Corporations	
Clifton Building	a	P. O. Box 63		
2661 Executive Cer		Tallahassee,	FL 32314	
Tallahassee, FL 32	201			

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

Charlie N. Long, Jr. and Edna G. Long Family Limited Partnership Insert name currently on file with Florida Department of State

Pursuant to the provisions of section 620.1 limited liability limited partnership, whose 10-07-1996, assign	certific	cate was filed with th	e Florida D	ed partnership of S epartment of S 593427222	or late on
adopts the following certificate of amendm				ip. Zg	29
This amendment is submitted to amend the foll	owing:				平路の
A. If amending name, enter the new name	<u>of the li</u>	mited partnership or	<u>limited liabi</u>	ility limited par	tnership
here:				(1) (2) (1) (1) (3) (4)	3
New name must be di	stinguish	able and contain an accep	otable suffix.	Sin Sin	.: ن
Acceptable Limited Partnership suffixes: Limited F	artnersh	in, Limited, L.P., LP, or	Ltd.	>	
Acceptable Limited Liability Limited Partnership s				L.L.L.P. or LLLP.	
B. If amending mailing address and/or principal office address here: New Principal Office Address (Must be STREET address) New Mailing Address:		270 Lakeview Blv. Lake Alfred, FL 33	d	ailing address	and/or
(May be post office box)		Haines City, FL 3	3845		
C. If amending the registered agent and/or new registered agent and/or the new register	ed office	e address here:	our records	s, enter the nan	ne of the
Name of New Registered Agent:	K. Chi	ristopher Long			
New Registered Office Address:	488 T	alamone Drive			
		Enter Florida	street addres	SS	
		Winter Haven	. Florida	33884	
		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.

K. WARDON HER LONG

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>	Type of Action
<u>GP</u>	Charlie N. Long, III	611 Dry Hollow Rd Elizabethton, TN 37643	Add College Remove
GP	Judy L. Brown	153 Melissa Trail Auburndale, FL 33823	Add F Remove
GP	K. Christopher Long	488 Talamone Drive Winter Haven, FL 33884	_ Add
My -		111 311 11 11 11 11 11 11 11 11 11 11 11	Add Remove
			Add Remove
			_
E. If the limited limited partners	l partnership or limited liabilit hip" status, enter change here:	y limited partnership is amend	ding its "limited liability

(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.

This Limited Partnership hereby elects to be a "Limited Liability Limited Partnership."

	******	-1
Effective date, if other than the date of filing: Effective date cannot be prior to nor more than 90 days after the office.)	date this document is filed by the	Florida Department
iuic./		
Signature(s) of a general partner or all general partn	<u>1ers*:</u>	2014 E 50 E F FALL/
*NOTE: Only one current general partner is required to sign this emoving a "limited liability limited partnership" election statement when adding or removing a "limited liability limited partnership" elections.	nt. Chapter 620, F.S., requires all	mership is adding or general partners to s
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		₩ -
ignature(s) of all new or dissociating general partne	er(s), if any:	
Charles Ino The		
and L Brown	-	
L. Allatorateral all		
P. COPP OF THE SENS		
Chorlie M Jary		
iling Fee: \$52.50		
Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75		