(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
•
(Document Number)
Certified Copies Certificates of Status
•
Special Instructions to Filing Officer:
A
A. LUNT
FEB 1 7 2009

Office Use Only



200143446242

02/16/09-01014-010 **52.50

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT:	BARINEAU	PROPERTIE	s. LTD.		
(Na	me of Florida Limited Par	tnership or Limited Liabilit	y Limited Partnership)		
The enclosed Certifi	cate of Amendment a	nd fee(s) are submitted	for filing.		
Please return all corn	respondence concernir	ng this matter to:			
THOMAS	M. BARTUE (Contact Person)	EAU	ri		
41/-					
	(Firm/Company)				
6905 AT		lwy.	SSE CO		
Quincy,	(Address) FL 32352 - City, State and Zip Code)	0991			
	ion concerning this ma				
THOMAS M.	BARINEAU	at (854) 6	27-3148 aytime Telephone Number)		
(Name of Cont	act Person)	(Area Code and D	aytime 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 Fee and Certified Copy	\$113.75 Filing Fee, Certified Copy, and Certificate of Status		
STREET ADDRES	SS:	MAILING A	ADDRESS:		
Registration Section		Registration	Section		
Division of Corpora	tions	Division of Corporations			
Clifton Building		P. O. Box 63	327		
2661 Executive Cen	ter Circle	Tallahassee,	FL 32314		
Tallahassee, FL 323	01	•			

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

	limited partnership, whose certificate was filed with the Florida Department of State on 976	
BARINEAU PRO	PERTIES LTD	PA !
(Insert name currently on fi	le with Florida Department of State)	3: L7
limited liability limited partnership, whose certifi	cate was filed with the Florida Depart orida document number A9400	ment of State on
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the l</u> here:	imited partnership or limited liability li	mited partnership
N/A		
(New name must be distinguish	to the provisions of section 620.1202, Florida Statutes, this Florida limited partnership or ability limited partnership, whose certificate was filed with the Florida Department of State on 1/196, assigned Florida document number A9600000 and the following certificate of amendment to its certificate of limited partnership. Identical submitted to amend the following: Identificate of limited partnership or limited liability limited partnership or limited liability limited partnership or limited liability limited partnership suffixes: Limited Partnership suffixes: Limited Liability Limited Partnership suffixes and/or principal office address here: New Principal Office Address: (Must be STREET address) New Mailing Address: (May be post office box) New Mailing Address: (May be post office box) New Mailing Address: (May be post office box) New Registered agent and/or registered office address on our records, enter the name of the tered agent and/or the new registered office address here: New Principal Office Address: (Enter Florida street address)	
Acceptable Limited Liability Limited Partnership suffixes: . B. If amending mailing address and/or princi	Limited Liability Limited Partnership, L.L.L.1	
principal office address here.	, ,	
• • • • • • • • • • • • • • • • • • •	N/A	
	6905 ATMPULGUS HU OUTNEY, FL 32352-	υΥ. Φ99/
		er the name of the
Name of New Registered Agent:	N/A	<u>.</u>
New Registered Office Address:	(Enter Florida atmost address)	
	(Enter Fioriaa street daaress)	
	Florida	

(City)

(Zip Code)

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

		1/1	(If Changing Registered Agent, Signature of New Registered				
		(If Changing Registered Age	ent, Signature of New Registered				
		the name and business addre	ss of each general partner				
d or remove	d from our records:						
<u>Title</u>	<u>Name</u>	Address	Type of Action				
Mrs.	Evaluar RA	Paris Francis / GAS Arma	Aux 65				
/V1/23.	10410ELLE 5.71	PADINEAU 6905 ATTA	352 PRemove &				
			—————————————————————————————————————				
			□ Add □ Remove				
			Remove 3:				
			DAdd				
			Remove				
			——————————————————————————————————————				
			☐ Add ☐ Remove				
		 					
			☐ Add ☐ Remove				
			Li Remove				
			□ Remove				

E. If the limited partnership or limited liability limited partnership is amending its "limited liability limited partnership" status, enter change here:

u This Lin	iited Partnersh	ip hereby	v elects to be a	"Limited	Liability	Limited Partn	ership."
------------	-----------------	-----------	------------------	----------	-----------	---------------	----------

☐ 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.)

	N/A	··· —		·-···		
	,					
						.
Effective data if other than the data	of filings	 -				
Effective date, if other than the date (Effective date cannot be prior to nor more	than 90 days afte	r the date th	is document is fi	iled by the Fi	orida Depa	rtment of
State.)						
Signature(s) of a general partner (or all general	<u>partners*</u>	<u>:</u>			
*NOTE: Only one current general partner	r is required to sig	gn this docum	nent unless the l	imited partne	ership is add	ding or
removing a "limited liability limited partne when adding or removing a "limited liabilit	rship" election sta	atement. Cha	apter 620, F.S., i	requires all g	eneral parti	ners to sig
_		•	,			
Chomas M. Barina	<u> </u>					20r
					An I	ם דו דו
	<u> </u>	•			်က်္ကြ	
						*
					C 45 C	- September 1
G'	4: 1	4(-)	:c		E E	<u>.</u>
Signature(s) of all new or dissocia	ting general p	artner(s),	ii any:			_
				· · · · · · · · · · · · · · · · · · ·		
						
	<u></u>			 		
77 T	0.50 F.O.					
8	\$52.50 \$52.50					
	\$8.75					