

A97000000114

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

(Document Number)

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APR 29 2008

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04/11/08--01043--026 \*\*52.50

2008 APR 28 A 10:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

*Eugene R. Alexander*  
COUNSELLOR AT LAW

*Member  
New Jersey and New York Bars*

April 10, 2008

THE BRADFORD SUITE 108  
256 COLUMBIA TURNPIKE  
FLORHAM PARK, N.J. 07932  
—  
(973) 822-1122  
FAX (973) 822-2200

Florida Department of State  
Division of Corporations  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

Re: C & L FAMILY LIMITED PARTNERSHIP

Gentlemen:

I am enclosing the following documents:

1. Cover letter and Certificate of Amendment to Certificate of Limited Partnership of C & L Family Limited Partnership and a check for Processing same in the amount of \$52.50. I am also enclosing A copy of the Amendment - please mark filed and return copy in envelope I have provided.
2. After you have processed document above please process the 2008 Limited Partnership Annual Report and I have enclosed a check In the amount of \$500 for processing this document.

If you have any questions upon receiving these documents please call us.

Thank you for your assistance.

Very truly yours,

*Eugene R. Alexander*  
EUGENE R. ALEXANDER

2008 APR 28 A 10:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 15, 2008

EUGENE R. ALEXANDER  
THE BRADFORD SUITE 108  
256 COLUMBIA TURNPIKE  
FLORHAM PARK, NJ 07932

SUBJECT: C & L FAMILY LIMITED PARTNERSHIP  
Ref. Number: A97000000114

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for C & L 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):

A general partner must sign the document.

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) 245-6094.

Agnes Lunt  
Regulatory Specialist II

Letter Number: 108A00022347

*Eugene R. Alexander*

COUNSELLOR AT LAW

*Member  
New Jersey and New York Bars*

THE BRADFORD SUITE 108  
256 COLUMBIA TURNPIKE  
FLORHAM PARK, N.J. 07932

(973) 822-1122  
FAX (973) 822-2200

April 24, 2008

Florida Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, Florida 32314

**FILED**  
2008 APR 28 A 10:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Re: C & L FAMILY LIMITED PARTNERSHIP  
Reference No. A97000000114

Letter No. 108A00022347

Gentlemen:

With regard to the above matter I am enclosing your letter dated April 15, 2008, original page 3 signed by the general partner and a copy of the document.

Please file same and provide me with a copy marked filed in the envelope I have enclosed.

If you have any questions please call me.

Very truly yours,

*Eugene R. Alexander*

EUGENE R. ALEXANDER

ERA:j

Enc.

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** C & L 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:

EUGENE R. ALEXANDER

(Contact Person)

EUGENE R. ALEXANDER, ESQ.

(Firm/Company)

Suite 108

256 Columbia Turnpike

(Address)

Florham Park, N.J. 07932

(City, State and Zip Code)

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TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

JOYCE L. ALEXANDER

at ( 973 )

822-1122

(Name of Contact Person)

(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**

C & L 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 January 14, 1997, 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:**

NO CHANGE

(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 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:

NO CHANGE

New Registered Office Address:

(Enter Florida street address)

, Florida

(City)

(Zip Code)

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TALLAHASSEE, FLORIDA

**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)

C. 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>
	CHARLES C. NEWFIELD, JR.	19 Orinco Port St. Lucie Florida 34952	<input checked="" type="checkbox"/> <del>Add</del> Remove
			<input type="checkbox"/> Add Remove
			<input type="checkbox"/> Add Remove
			<input type="checkbox"/> Add Remove
			<input type="checkbox"/> Add Remove
			<input type="checkbox"/> Add Remove

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TALLAHASSEE, FLORIDA

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D. 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.)

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Effective date, if other than the date of filing: Date of Filing is effective date  
(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, F.S., requires all general partners to sign when adding or removing a "limited liability limited partnership" election statement.)

*Lois E. Newfield*

LOIS E. NEWFIELD  
GENERAL PARTNER

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

DISSOCIATING GENERAL PARTNER IS DECEASED

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TALLAHASSEE, FLORIDA

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