

A97000000642

CONDEV

Post Office Box 1748, Winter Park, Florida 32790-1748

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-05/24/99-01075-013

*****35.00 *****35.00

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Dakmont, Ltd.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
	Profit
	NonProfit
	Limited Liability
	Domestication
	Other

AMENDMENTS	
	Amendment
	Resignation of R.A., Officer/ Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

OTHER FILINGS	
	Annual Report
	Fictitious Name
	Name Reservation

REGISTRATION/ QUALIFICATION	
	Foreign
	Limited Partnership
	Reinstatement
	Trademark
	Other

Name	
Availability	MJH
Document Examiner	
Updater	
Updater Verifier	
Acknowledgement	
W. P. Verifier	

99 JUN 11 PM 1:28

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

A97000000642

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

June 2, 1999

CONDEV
POST OFFICE BOX 1748
WINTER PARK, FL 32790-1748

SUBJECT: OAKMONT, LTD.
Ref. Number: A97000000642

We have received your document for OAKMONT, LTD. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document submitted to change the Registered Agent address was for a Corporation, however, OAKMONT, LTD. is a Limited Partnership. Please complete the enclosed application and resubmit.

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) 487-6967.

Michelle Hodges
Document Specialist

Letter Number: 999A00030051

**LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED
OFFICE OR REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes, the undersigned limited partnership organized under the laws of the state of Florida, submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. Oakmont, Ltd.
Name of the limited partnership
2. 3-14-97 3. A97000000642
Date of filing/registration in Florida Document number assigned

4. The name and address of the present registered agent and office:

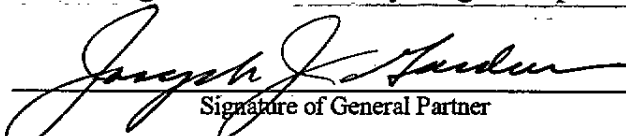
W.P. Battaglia, Esquire
222 West Comstock Avenue, Suite 101
Winter Park, Florida 32789

5. The name and street address of the successor registered agent and office: (P.O. Box not acceptable)

W.P. Battaglia, Esquire
100 Lincoln Avenue
Winter Park, Florida 32789

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Such change was authorized by the general partners.


Signature of General Partner

6-9-99
Date

Having been named as registered agent and to accept service of process for the above stated limited partnership at the place designated in this certificate, 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 obligation of my position as registered agent.

Registered Agent signature

Date

Filing Fee: \$35.00

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