Division of Corporations Public Access System

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Division of Corporations

Fax Number

: (850)617-6383

Account Name

: GREEN SCHOENFELD & KYLE LLP

Account Number : I20000000177

: (239)936-7200

Phone Fax Number

: (239)936-7997

LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION

DODSON FAMILY PARTNERSHIP, LTD.

Certificate of Status	1
Certified Copy	
Page Count	03
Estimated Charge	\$113.75

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M. THOMAS

DEC 2 2 2008

EXAMINER

R07-103C 12/19/2008

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CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

Dodson Family Partnership, L	.td
(Insert name currently o	n file with Florida Depuriment of State)
limited liability limited partnership, whose cer	, Florida Statutes, this Florida limited partnership or tificate was filed with the Florida Department of State on Florida document number,
adopts the following certificate of amendment	to its certificate of limited partnership.
This amendment is submitted to amend the following	uft:
A. If amending name, enter the new name of there:	ne limited partnership or limited lighility limited partnership
Dodson Family Partn	mership, LLLP
	nishable and contain au acceptable suffix.)
Acceptable Limited Partnership suffixes: Limited Partn Acceptable Limited Ltability Limited Partnership suffix	ership, Limited, L.P., LP. or Ltd. es: Limited Liability Limited Partnership, L.L.L.P. or LLLP.
B. If amending mailing address and/or principal office address here:	ncipal office address, <u>enter new mailing address and/or</u>
New Principal Office Address:	7A 05
(Must he STREET address)	SECRE
New Mailing Address; (May be post office box)	19 AH 8: 5
C. If amending the registered agent and/or reg new registered agent and/or the new registered o	istered office address on our records, enter the flame of the
Name of New Registered Agent:	
New Registered Office Address:	(Enter Florida street address)
	, Florida
	(City) (Zin Code)

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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>	Type of Action		
			☐ Add ☐ Remove		
			☐ Add ☐ Remove		
			□ Add □ CECHE □ Remove—CHE	08 DEC 19	
			Add SERV Remove:	19 44	
			FLORIDA Remov	සි. වූ	
			□ Add □ Remove		

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" lunited liability limited partnership" status, all general partners must sign this amendment.)

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F. If amending any other informati	on, enter change	e(s) here:	(Attach addn	tional sheets	, if necesso	ary.)	
		 -					
					<u> </u>		
Effective date, if other than the da (Effective date cannot be prior to nor mo State)	te of filing: ore than 90 days aft	ter the dat	e this documen	t is filed by th	he Florida I	Departmen	nt of
Signature(s) of a general partne							
(*NOTE: Only one current general part removing a "limited liability limited part when adding or removing a "limited liab	nership" election s	tatement.	Chapter 620, F	.S., requires	artn er ship i all general:	is adding o partners to	r sign
Charles W. Dodson Trust			Chi	S 300	Dav	>2	
Ann F. Dodson Trust		2	Tu	3	Dod	20	<u>2</u> ş
						SEC F	9 ###
Signature(s) of all new or dissoc	lating general	parmeri	s), if any:			STATE	<u>ක</u> ස
	<u> </u>						
							
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75						