A97000001147

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(Cit	y/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to I	Eiling Officer	
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NEURINARY OF STATE

D. SCOTT

COVER LETTER

Division o	on Section f Corporations				
SUBJECT: James	Busby Limited Partnership				
SUBJECT:	Name of Florida Limited Pa	rtnership or Limited	Liability Limited I	artnership	
The enclosed Cert	ificate of Amendment a	ınd fee(s) are sub	mitted for filing		
Please return all c	orrespondence concerni	ing this matter to:			
Jim Busby III					
	Contact Person		_		
James Busby Limited	l Partnership				
	Firm/Company				
PO Box 2139					
· · · · · · · · · · · · · · · · · · ·	Address		_		
Ft Walton Bch, FL 32					
	City, State and Zip Code		_		
jblimitedpartnership	- · ·			م ب <u>ہ</u>	
F-mail address:	(to be used for future annual	I report notification)	_	2% 冒	77
is man address,	(iv i~ ti.see for rating distinct	report notification;		三	نست
For further inform	ation concerning this m	atter, please call;		ASS.	TLED
Jim Busby HI	J	850	225-7241	3338	, []
Name of Co	ntact Dorcan	at () ind Daytime Teleph	- in (, U
Name of Co	mact reison	Area Code a	ind Dayume Telepi	Die Number	ب.
Enclosed is a chec	k for the following amo	ount:		500	6.
■ \$52.50 Filing Fee	☐\$61.25 Filing Fee and Certificate of Status	□\$105.00 Filing and Certified Co	opy Certified	75 Filing Fee, I Copy, and ate of Status	
STREET ADDR	ESS:	MAIL	ING ADDRES	SS:	
Registration Section Registra		tration Section	-		
Division of Corporations Division		on of Corporation	ons		
5		Box 6327			
Tallahassee, FL 3		I allah	assec, FL 3231	4	

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

James Busby Limited Partnership		
Insert name currently on fi	le with Florida De	partment of State
Pursuant to the provisions of section 620.1202, F limited liability limited partnership, whose certificate of amendment to	cate was filed virida document	with the Florida Department of State on number A97000001147
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the l here:	imited partners	hip or limited liability limited partnershi
New name must be distinguish	nable and contain a	n acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Partnersh Acceptable Limited Liability Limited Partnership suffixes:		
B. If amending mailing address and/or princi principal office address here:	pal office addr	ess, <u>enter new mailing address and/or</u>
New Principal Office Address: (Must be STREET address)		THE T
New Mailing Address: (May be post office box)		HASSEE M
C. If amending the registered agent and/or registe	ered office addr	ess on our records, enter the name of the
new registered agent and/or the new registered offic	<u>e address here</u> :	3,8
Name of New Registered Agent:		
New Registered Office Address:	Enter F	lorida street address
		Florida
	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.

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>	Address	Type of Action
GP	James Busby Jr	PO Box 760 Ft Walton Bch, FL 32549	
GP	James Busby III	729 Overbrook Dr Ft Walton Bch, FL 32547	☐ Add ☐ Remove
GP	Busby Management, Inc	PO Box 2139 Ft Walton Bch, FL 32549	■ Add □ Remove
			Add Remove
			Add
			TCRAdd MRemos
the limite	ed partnership or limited liabi ship" status, enter change her	lity limited partnership is an	
This Limi	ited Partnership hereby elects to	be a "Limited Liability Limited	ン J Partnership."

(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.

F. If amending any other information, enter cha	unge(s) here: (Attach additional sheets, if necessary.)
	_
Effective date, if other than the date of filing: 1 Jan 2 (Effective date cannot be prior to nor more than 90 days after	018 the date this document is filed by the Florida Department of
State.) Note: If the date inserted in this block does not meet the appli be listed as the document's effective date on the Department of	cable statutory filing requirements, this date will not
Signature(s) of a general partner or all general p	artne <u>rs*:</u>
(*NOTE: Only one current general partner is required to sign removing a "limited liability limited partnership" election stat when adding or removing a "limited liability limited partnersh	ement. Chapter 620, F.S., requires all general partners to sign
Jor My The GP	
<u> </u>	
Signature(s) of all new or dissociating general pa	rtner(s), if any:
- 0 I T	
Jone, Burky Jr	THE
James Bucky II	The state of the s
Busby Management, Inc	Marks T. Prist "
	<i>v</i>
Filing Fee: \$52.50 Certified Copy (optional): \$52.50	
Certificate of Status (optional): \$8.75	