Florida Department of State

Division of Corporations Public Access System

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Account Number : 071250001512 Phone : (305)789-9200 Fax Number : (305)789-9201

LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION

FELTON FAMILY LIMITED PARTNERSHIP

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$105.00

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Corporate Filing Menu

M. THOMAS

SEP - 9 2009

EXAMINE^{9/8/2009}

Audit No. H09000196934 3

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

FELTON FAMILY LIMITED PARTNERSHIP Insert name currently on file with Florida Department of State

Pursuant to the provisions of section 620.12 limited liability limited partnership, whose July 9, 1997, assigned	certificate was filed wi	th the Florida Department of S	tate on
adopts the following certificate of amendment			
This amendment is submitted to amend the following	wing:		
A. If amending name, enter the new name o here:	f the limited partnershi	p or limited liability limited par	<u>tnership</u>
New name must be dist	inguishable and contain an	acceptable suffix.	<u></u>
Acceptable Limited Partnership suffixes: Limited Pa Acceptable Limited Liability Limited Partnership su			AS SEE
B. If amending mailing address and/or p principal office address here:	rincipal office addres	ss, enter new mailing ader Ess	· in
New Principal Office Address (Must be STREET address)	§:	To the second se	A 8: 12
New Mailing Address: (May be post office box)			1
C. If amending the registered agent and/or new registered agent and/or the new registered		s on our records, <u>enter the nan</u>	ne of the
Name of New Registered Agent:	V		
New Registered Office Address:	Enter Flo	orida street address	
- 1 (1995年) (1995年) - 1 (1995年) (1995年) - 1 (1995年) (1995年) (1995年) (1995年) (1995年) (1995年)	City	Florida Zip Code	
Audit No. H09000196934 3	eng til strange s		

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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>	Name	Address	Type of Action
	<u>GP</u>	James E. Felton, Sr. Trustee (deceased)	3 Allamanda Terrace Key West, FL 33040	Add S
	GP	James E. Felton, Jr.	3 Allamanda Terrace Key West, FL 33040	Add F
	<u>GP</u>	Elizabeth Felton Anno	3 Allamanda Terrace Key West, FL 33040	Add GRemovant 5
	<u>GP</u>	Mary Felton Vickers	3 Allamanda Terrace Key West, FL 33040	_ Add _ Remove
				Add Remove
				Add Remove
	ed partnership	artnership or limited liability " status, enter change here: Partnership hereby elects to be	•	
لسيا		•	·	•
ப	This Limited	Partnership hereby removes its	"Limited Liability Limited Part	tnership" status.
(NOT	E: If adding or r	emoving" limited liability limited pa	rtnership" status, all general partne	rs must sign this amendment.)

ffective date, if other than the date of filing: ffective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of use.) gnature(s) of a general partner or all general partners*: NOTE: Only one current general partners is required to sign this document unless the limited partnership is adding or noving a "limited liability limited partnership" election statement. Chapter 620, F.S., requires all general partners to sign the adding or removing a "limited liability limited partnership" election statement.) AFE P		additional sheets, if necessary.)
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