	IMPORM BU		PORT	.(UBR)	
DOCUMENT'# A9700002091					Strong PLES
Betlock Investments, Ltd.					DIVISION OF CORPORATIONS
Principal Place of Business 1150 Tarpon Center Drive Unit 707 Vegice FL 34285		Mailing Address 1150 Tarpon Center Drive Unit 707		Drive	OI APR 23 AM 9: 06
	Place of Business	Verice FL 34	185		_
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE
City & State		City & State			4. FEI Number Applied For
Zip Country		Zip Country		ntry	65-678588 Not Applicable 5 Cortificate of Status Posited
 	6. Name and Address of Curren	at Registered Agent		-	Certificate of Status Desired Fee Required Name and Address of New Registered Agent
Robert W. Darnell				_Name	1. Italia and Address of New Registered Again
1820 Ringling Blud.				Street Address (P.O. Box Number is Not Acceptable)	
Sora	150ta FL 34236			City	FL Zip Code
The above named entity submits this statement for the purpose of changing its re					
SIGNATURE 9. Capital Co	Signature, typed or printed name of registered ager	40. 4			uired when reinstating) DATE
as Shown	on record. 4977,170.0		to date.		11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
					ISTERED AND ACTIVE WITH THIS OFFICE. Ient must be filed to change a general partner.
12.	GENERAL PARTNER INFORMATION				ADDRESS CHANGES ONLY
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	Betlock, Erva I. 1150 Tarpon Center Drive, Unit 707 Venice FL 34285			-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS				EET ADDRESS	1000040644717 -04/24/0101093002
CITY-ST-ZIP			- CITY	ST-ZIP	****526.25 ****526.25
NAME *			STRE	ET ADDRESS	
STREET ADDRESS CITY-ST-ZIP		·	CITY	-ST-ZIP	D. & 201
DOCUMENT # NAME			STRE	ET ADDRESS	00 W21
STREET ADDRESS CITY-ST-ZIP			CİTY	-ST-ZiP	
DOCUMENT # NAME			STRE	ET ADDRESS	
STREET ADDRESS CITY-ST-ZIP			CITY	-ST-ZIP	
DOCUMENT / NAME STREET ADDRESS CITY-ST-			STRE	ET ADDRESS	
			CITY	-ST-ZIP	
indicated the receiv	on this report is true and accurate and er or trustee empowered to execute the	l that my signature shall ha	ve the same	e legal effect as i	Section 119.07(3)(i), Florida Statutes. I further certify that the information if made under oath; that I am a General Partner of the limited partnership or
SIGNAT		R PRINTED NAME OF SIGNING GEN	URC IERAL PARTNEI	R	19 480-1508 Date Daytime Phone #