A9700002255

<u></u>	PHIPPS VENTURES, INC.	ı		
3110 C	CAPITAL CIRCLE N.E. TALLAHASSEE	, FL 32308		•
,				
City/State/Z	ip Phone #		Office Use O	nlv
CORPORATION N	AME(S) & DOCUMENT	f NUMBER	(S), (if known):	
1. <u>(Corpor</u>	ration Name)	(Document	#)	
2				 -
(Corpor	ration Name)	(Document	:#)	
3(Corpor	ration Name)	(Document	:#)	
1		•	,	
(Corpor	ration Name)	(Document	#)	
	•	-		
☐ Walk in ☐	Pick up time	Ļ	Certified Copy	
			- certified copy	
☐ Mail out ☐	Will wait Photo	_	Certificate of State	18
		_	Certificate of State	
EW FILINGS	Will wait Photo AMENDMENTS Amendment	_	Certificate of State 40001	026118741 3/10/9801081020
EW FILINGS	AMENDMENTS Amendment	осору	Certificate of State 40001	026118741
Profit NonProfit	AMENDMENTS	ocopy cer/ Director	Certificate of State 40001	026118741 3/10/9801081020
Profit NonProfit Limited Liability	AMENDMENTS Amendment Resignation of R.A., Office	ocopy cer/ Director	Certificate of State 40001	026118741 3/10/9801081020 ****35.00 *****35.00
Mail out FEW FILINGS Profit NonProfit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of R.A., Office Change of Registered Age	ocopy cer/ Director	Certificate of State 40001	026118741 3/10/9801081020 ****35.00 *****35.00 TALLAR
Profit NonProfit Limited Liability Domestication	AMENDMENTS Amendment Resignation of R.A., Office Change of Registered Age Dissolution/Withdrawal	ocopy cer/ Director	Certificate of State 40001	026118741 3/10/9801081020 ****35.00 *****35.00 TALLAR
Profit NonProfit Limited Liability Domestication	AMENDMENTS Amendment Resignation of R.A., Office Change of Registered Age Dissolution/Withdrawal Merger REGISTRATIO	cer/ Director	Certificate of State 40001	026118741 3/10/9801081020 ****35.00 *****35.00 TALLAR
Profit NonProfit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of R.A., Office Change of Registered Age Dissolution/Withdrawal Merger REGISTRATION QUALIFICATION	cer/ Director	Certificate of State 40001	026118741 3/10/9801081020 ****35.00 *****35.00 TALLAR
Profit NonProfit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of R.A., Office Change of Registered Age Dissolution/Withdrawal Merger REGISTRATION QUALIFICATION Foreign	cer/ Director	Certificate of State 40001	026118741 02611-020 3/10/9801081020 ****35.00 ******35.00 SECRETARY TALLAHASSE
Profit NonProfit Limited Liability Domestication Other OTHER FILINGS Annual Report Fictitious Name	AMENDMENTS Amendment Resignation of R.A., Office Change of Registered Age Dissolution/Withdrawal Merger REGISTRATION QUALIFICATION Foreign Limited Partnership	cer/ Director	Certificate of State 40001	4-020 4-020 7-1-020 7-10-01081020 98 SEP -8 AM 9: 56 98 SEP -8 AM 9: 56 SECRETARY OF STATE TALLAHASSEE, FLORIDA
Profit NonProfit Limited Liability Domestication Other OTHER FILINGS Annual Report	AMENDMENTS Amendment Resignation of R.A., Office Change of Registered Age Dissolution/Withdrawal Merger REGISTRATION QUALIFICATION Foreign	cer/ Director	Certificate of State 40001	98 SEP - 8 AM 9: SECRETARY OF ST. TALLAHASSEE, FLO

Examiner's Initials



August 25, 1998

Ms. Louise Flemming-Jackson Corporate Specialist Supervisor Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Phipps F N Limited Partnership

Dear Ms. Flemming-Jackson:

In accordance with your letter dated August 14, 1998 (copy enclosed), we are enclosing your form for the Statement of Change for the Registered Agent.

Please call me at (850) 297-6086 if you have any questions.

Very truly yours,

David E. Wilder

en le cille

/kr

Enclosures



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

August 28, 1998

PHIPPS VENTURES, INC. 3110 Capital Circle, NE Tallahassee, FL 32308

SUBJECT: PHIPPS F N LIMITED PARTNERSHIP

Ref. Number: A97000002255

We have received your document for PHIPPS F N LIMITED PARTNERSHIP 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 registered agent must sign accepting the designation.

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) 487-6910.

Letter Number: 998A00044620

Louise Flemming-Jackson Corporate Specialist Supervisor



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

August 14, 1998

PHIPPS VENTURES, INC. 3110 Capital Circle, NE Tallahassee, FL 32308

SUBJECT: PHIPPS F N LIMITED PARTNERSHIP

Ref. Number: A97000002255

We have received your document for PHIPPS F N LIMITED PARTNERSHIP 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 application/form submitted does not meet the requirements of this office; please complete the attached application/form.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

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) 487-6910.

Letter Number: 198A00042274

Louise Flemming-Jackson Corporate Specialist Supervisor

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

Pursuant to the provisions of	sections 620.105 and 6	520.1051, Florida Sta	tutes, the undersigned limited
partnership organized under	the laws of the state of	Florida	, submits the
following statement in order	to change its registere	d office or registered	agent, or both, in the state of
Florida.			
· DUTDDC E N I TM	TMEN DADMMEDCHTI	2	
I. PHIPPS I N LIM	ITED PARTNERSHII Name of the lim		
- 10/20/07	•	*070000000	
2. 10/20/97 Date of filing/registration	3	A97000002255	Document number assigned
4. The name and address of		agent and office:	
4. The hame and address of	. the present registered	agent and office.	
Dav	id E. Wilder		7 SET
311	O Capital Circle	e, NE	经常工
	lahassee, FL 323		ASS.
5. The name and street add			ASSELLATION OF STATE
acceptable)	1055 Of the Buccessor fe	gistored agont and or	S. S. Down week. S. S. S.
De:	nnis O. Boyle		影
31	10 Capital Circl	Le, NE	,
- Thirt should be seen a se	llahassee, FL 32		
Such change was authorized	by the general partner	s	
Such change was authorized Phipps Verifures, In	nc. General Par	tner	·
By:	7/		8/24/98
Signature of the	neral Partner	Date	>
Having been named as regi	stered agent and to acc	ept service of proces.	s for the above stated limited
 agent and agree to act in th 	is capacity. I further a	agree to comply with	he appointment as registered the provisions of all statutes
relative to the proper and co obligation of my position as	im ple te performance oj registered agent.	f my duties, and I am	familiar with and accept the
			8/24/98
Registered Ager	ıt signature	Date	
	Filing Fee	e: \$35.00	
/			

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