DOCUMENT # A9700002759 1. Entity Name					SECRETARY OF STATE OF	
FLA #17	'81, LTD.				00 MAY 2 AM 10: 45	
Principal Place of Business % RAMSEY DEVELOPMENT, INC. 6950 PHILLIPS HWY. SUITE 28 JACKSONVILLE FL 32216			Mailing Address % RAMSEY DEVELO 6950 PHILLIPS HWY JACKSONVILLE FL 3	, SUITE 28		
2. Principal Place of Business		3. Mailing Address				
Suite, Apt. #, etc.			Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE	
City & State	в		City & State		4. FEI Number 58-2358234 Applied For Not Applicable	
Zip		Country	Zip	Country	5. Certificate of Status Desired \$8.75 Additional Fee Required	
	6. Name	and Address of Curr	ent Registered Agent		7. Name and Address of New Registered Agent	
ONE INDE	ROBERT (EPENDENT IVILLE FL 3	DRIVE		Street A	Randal C. Fairbanks Address (P.O. Box Number is Not Acceptable) 217 Ponte Vedra Park Drive, Suite 200	
			_	City	Ponte Vedra Beach FL Zip Code 32082	
8. The above	named eating	submits this statemen	nt for the nurcose of changing	the state of the same		
SIGNATURE .	Signature typed	De C	Thibroke	ng its registered office of	or registered agent, or both, in the State of Florida. ature required when reinstating) DATE	
9. Capital Co	ntributions on record.	\$1,000.0	Gent and title if applicable. 10. Amount of 0 in FLORIDA	(NOTE: Registered Agent signa Capital Contributions A to date.	# DATE 11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION	
9. Capital Co	ntributions on record.	\$1,000.0	gent and title if applicable. 10. Amount of 0 in FLORIDA ER THAT IS A BUSINESS	(NOTE: Registered Agent signa Capital Contributions A to date:	ature required when reinstating) DATE 11. MAKE CHECK PAYABLE TO DEPT. OF STATE	
9. Capital Co as Shown	ntributions on record. A (NOTE	\$1,000.0 GENERAL PARTNE : General Partners GENERAL PART	gent and title if applicable. 10. Amount of 0 in FLORIDA ER THAT IS A BUSINESS	(NOTE: Registered Agent signa Capital Contributions A to date:	# 1,000.00 ### The state of the control of the con	
9. Capital Co as Shown of 12. DOCUMENT & NAME STREET ADDRESS	P9700010 THE WILC	\$1,000.0 GENERAL PARTNE : General Partners GENERAL PART 6253 COX GROUP, INC. LIPS HWY, SUITE	gent and title if applicable. 10. Amount of 0 in FLORIDA ER THAT IS A BUSINESS MAY NOT be changed NER INFORMATION	(NOTE: Registered Agent signal Capital Contributions A to date. S ENTITY MUST BE on the form; an amo	* I, DOO_OO REGISTERED AND ACTIVE WITH THIS OFFICE. endment must be filed to change a general partner.	
9. Capital Co as Shown of 12. DOCUMENT # NAME STREET ADDRESS CITY- ST-ZIP DOCUMENT #	P9700010 THE WILC	\$1,000.0 GENERAL PARTNE : General Partners GENERAL PART 6253 COX GROUP, INC.	gent and title if applicable. 10. Amount of 0 in FLORIDA ER THAT IS A BUSINESS MAY NOT be changed NER INFORMATION	(NOTE: Registered Agent signa Capital Contributions to date. S ENTITY MUST BE on the form; an ame 13. STREET ADDRESS	* I, DOO_OO REGISTERED AND ACTIVE WITH THIS OFFICE. endment must be filed to change a general partner.	
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP



904-332-6900

Daytime Phone #