Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : 120000000195
Phone : (850) 521-0821

\*\*Enter the email address for this business entity to be used for future

annual report mailings. Enter only one email address please.\*\*

: (850) \$58-1515

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CHETARY OF STATE

## LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION CAMPLIFE, LTD.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$52.50

A. LUNT

APR 27 2011

**EXAMINER** 

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Corporate Filing Menu

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## **COVER LETTER**

10:	Division of C						
SUBJ	ECT: Campl						
	(Na	me of Florida Limited Pa	rtnership or Limited L	lability	Limited Pa	rtnership)	
The er	nclosed Certific	cate of Amendment a	nd fee(s) are subm	itted fi	or filing.		
Please	return all corr	espondence concerni	ng this matter to:				
Rocy	tha Staton						
		(Contact Person)				2788	
Merit	as, LLC					149	20
<u></u>		(Firm/Company)		•			~ <u></u> >>
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<u>North</u>	brook, IL 60			ı		وال سرا وي فيس	<u> </u>
	(6	City, State and Zip Code)				泵	<b>SW?</b>
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For fu	rther informati	on concerning this ma	atter, please call:				
Rocy	tha Staton		at ( 847	562-	-5375		
J.	(Name of Conta	ct Person)	(Area Code			hone Nun	iber)
Enclos	ed is a check f	or the following amo	unt:				
፟ \$52.	50.Filing Fee	□\$61.25 Filing Fee and Certificate of Status	\$105.00 Filing and Certified Copy		\$113,75 Certified C Certificate	Copy, and	
STRE	ET ADDRES	S:	MAILI	NG Al	DDRESS	:	
Registration Section		Registration Section					
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	executive Centers	,	Tallahas	ssee, F	L 32314		
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## CERTIFICATE OF AMENDMENT

CERTIFICATE OF	FLIMITED PARTNERSHIP	
	OF	
Camplife, Ltd.	·	· · · · · · · · · · · · · · · · · · ·
(Insert name currently on	file with Florida Department of State)	F1/4 50
•		3 m
D	District Control of Plant I Pro-	
Pursuant to the provisions of section 620.1202, limited liability limited partnership, whose cert		
O1/07/1998, assigned F		
adopts the following certificate of amendment t	to its certificate of limited partnershi	
		F.
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the	o limited and another on limited light	lan limitani manan mukim
here:	e natica parinership or manca naph	ity minied partnership
•,		
(Non-some set by diet)	shable and contain an acceptable suffix.)	
(see name must be distillent	sumple and contain an acceptance sumx.	•
Acceptable Limited Partnership suffixes: Limited Partne Acceptable Limited Liabllity Limited Partnership suffixe:		II Portii P
receptable Lanned Elabathy (sinaled 1 detaers mp suffixe.	s. Limited Extensity Limited 1 drivership. L.	L.L.F. Of LILLI.
B. If amending mailing address and/or prine	cipal office address, <u>enter new ma</u>	iling address and/or
principal office address here:		
New Principal Office Address:		
(Must be STREET address)		
(man of others)		<del></del>
New Mailing Address:		· · · · · · · · · · · · · · · · · · ·
(May be post office box)		
C. If amending the registered agent and/or regis		enter the name of the
new registered agent and/or the new registered of	fice address here:	
Name of New Registered Agent:		***************************************
None Product of AMERICA		
New Registered Office Address:	(Enter Florida street addres	
	12mer 1 toriua su est adures.	<b>u</b> /
· · · · · · · · · · · · · · · · · · ·	, Florida	
	(Ĉity) (	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:

Title	Name	Address	Type of Action		
General fortner	Morth Boward Preparating Schools, Exc.	630 Dundo Rús Ste. 400 Northrox, II. Cowo2	Add Add 20 170 170 170 170 170 170 170 170 170 17		
Guneral Partner	North Broad Peparatry Schrols LLC	1830 Dunde Rd. Str. 400 Northmoky IL 60062	_ II veinove		
<del></del>			□ Add- □ Remove ♡		
			☐ Add ☐ Remove		
processor and the state of the			Add Remove		
			Add Remove		

- E. If the limited partnership or limited liability limited partnership is amending its "limited liability limited partnership" status, enter change here:
  - This Limited Partnership hereby elects to be a "Limited Liability Limited Partnership."
  - This Limited Partnership hereby removes its "Limited Liability Limited Partnership" status.

(NOTE: If adding or removing" limited liability limited partnership" status, all general partners must sign this amendment.)

F. If amending any other informa			,			
				<u> </u>		
	4,		<del></del>			
	•••••		*** ** ** ** ***			
Effective date, if other than the d	ate of filin	g:				
State.)	iore inan 90	aays after me a	ate trus accument is j	uea oy ine rioriau	ивригите	int oj
Signature(s) of a general partn	er or all g	eneral partn	ers*:			
(*NOTE: Only one current general par				limited partnership	is adding	or
removing a "limited liability limited par when adding or removing a "limited lia	rmership" ele	ection statement	t. Chapter 620, F.S.,	requires all general	partners't	o sign
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				Site of the state	<u>(79)</u> (27)	
Signature(s) of all new or disso	ciating ge	neral partne	r(s), if any:	Mark #	<i>∞</i>	
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Filing Fee:	\$52.50					
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