## 478000000274

255 Alhambra Circle, Suite 1125 Coval Gables, F1 33184
City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Pick up time Walk in Certified Copy ☐ Will wait Photocopy 📕 Mail out Certificate of Status AMENDMENTS NEW FILINGS 300002710063--2 Profit Amendment \*\*\*\*\*35.00 \*\*\*\*\*35.00 NonProfit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Availa bibb hestication Dissolution/Withdrawal Merger DUC Examiner REGISTRATION/ OTHER FILINGS **QUALIFICATION** Annual Report Foreign Verify Fictitious Name Limited Partnership Acknowledge Baservation DCC Reinstatement UUC W. P. Verifyer Trademark Other

VTS COOCOOSPA

CR2E031(1/95)

Examiner's Initials

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

Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes, the undersigned limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. Richart Limited Partnership	
Name of the limited partnership	
2. 1/20/198  Date of filling/registration in Florida  3. A 9800000000000000000000000000000000000	
4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:    Law Offices of State Garellek, P.A.	Talla Talla
5. The name and address of the new registered agent and/or office:	
EXP J. C. J. Steven C. Scheinfeldt, Esq. Elizabeth K. Richert, Esq.  SKR J. C. J. Steven C. Scheinfeldt, Esq. Elizabeth K. Richert, Esq.  SKR J. C. J. Steven C. Scheinfeldt, Esq. Elizabeth K. Richert, Esq.  SKR J. C. J. Steven C. Scheinfeldt, Esq. Elizabeth K. Richert, Esq.  Florida street address (P.O. Box not acceptable)  SKR J. C. J. Corni Guides, El 33134  City, State and Zip	4
6. Such change(s) was/were authorized by the general partners.	
Signature of General Partner	

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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the limited partnership has been notified in writing of this change.

Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 Filing Fee: \$35.00