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CORPORATE CLINIC
PAUL & PHYLLIS DOUGLAS, P.A.
9540 CYPRESS LAKE DRIVE
FORT MYERS, FLORIDA 33919-4999

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____ (Corporation Name) (Document #)

2. _____ (Corporation Name) (Document #)

3. _____ (Corporation Name) (Document #)

4. _____ (Corporation Name) (Document #)

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☐ Walk in

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☐ Certificate of Status

NEW FILINGS	
☐	Profit
☐	NonProfit
☐	Limited Liability
☐	Domestication
☐	Other

AMENDMENTS	
☐	Amendment
☐	Resignation of R.A., Officer/ Director
☐	Change of Registered Agent
☐	Dissolution/Withdrawal
☐	Merger

OTHER FILINGS	
☐	Annual Report
☐	Fictitious Name
☐	Name Reservation

REGISTRATION/ QUALIFICATION	
☐	Foreign
☐	Limited Partnership
☐	Reinstatement
☐	Trademark
☐	Other

Name	_____
Availability	_____
Document	_____
Fee	_____
Under	_____
Verified	_____
Address	_____
W. P. Ver	_____

FF \$52.50

Examiner's Initials

**CERTIFICATE OF AMENDMENT
TO
CERTIFICATE OF LIMITED PARTNERSHIP
OF**

JOHNSON DOUGLASS LIMITED PARTNERSHIP

(Insert name currently on file with Florida Dept. of State)

Pursuant to the provisions of section 620.109, Florida Statutes, this Florida limited partnership, whose certificate was filed with the Florida Dept. of State on 1-29-1998, adopts the following certificate of amendment to its certificate of limited partnership.

FIRST: Amendment(s): (indicate article number(s) being amended, added, or deleted)

12. DELETE DOUGLASS, PHYLLIS J TRUSTEE
9540 CYPRESS LAKE DRIVE
FORT MYERS, FL 33919

ON JAN 26 PM 5:00

FILED

SECOND: This certificate of amendment shall be effective at the time of its filing with the Florida Department of State.

THIRD: Signature(s)

Signature of current general partner:

Paul R. Douglass, DVM

Signature(s) of new general partner(s), if applicable:

