

A48000000383

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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18 FEB -2 AM 9:49  
TALLAHASSEE, FLORIDA  
DEPT. OF STATE

FEB 05 2018

Y SULKER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 31, 2018

PAMELA S WHITNEY  
650 PHIPPS BLVD NE. APT 5107  
ATLANTA, GA 30326

SUBJECT: M AND P PARTNERSHIP LTD.  
Ref. Number: A98000000383

We have received your document for M AND P PARTNERSHIP LTD. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

All general partners must sign when adding or deleting an election to be a limited liability limited partnership.

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) 245-6051.

Yasemin Y Sulker  
Regulatory Specialist II

Letter Number: 118A00002125

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** M and P Partnership LTD  
Name of Florida Limited Partnership or Limited Liability Limited Partnership

The enclosed Certificate of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Pamela S. Whitney  
Contact Person

Firm/Company

650 Phipps Blvd NE Apt 5107  
Address

Atlanta, GA 30326  
City, State and Zip Code

riversliker11@gmail.com  
E-mail address: (to be used for future annual report notification)

RECEIVED  
FEB 05 2013

For further information concerning this matter, please call:

Pamela S. Whitney at (386) 986-8108  
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$52.50 Filing Fee      ☐ \$61.25 Filing Fee and Certificate of Status      ☐ \$105.00 Filing Fee and Certified Copy      ☐ \$113.75 Filing Fee, Certified Copy, and Certificate of Status

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

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

M and P Partnership LTD

Insert name currently on file with Florida Department of State

Pursuant to the provisions of section 620.1202, Florida Statutes, this Florida limited partnership or limited liability limited partnership, whose certificate was filed with the Florida Department of State on 2/9/1998, assigned Florida document number A98000000383, adopts the following certificate of amendment to its certificate of limited partnership.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited partnership or limited liability limited partnership here:**

New name must be distinguishable and contain an acceptable suffix.

*Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.*

*Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or Ltd.P.*

**B. If amending mailing address and/or principal office address, enter new mailing address and/or principal office address here:**

New Principal Office Address:

(Must be STREET address)

11647 SW CR 240

Lake City, FL 32024

New Mailing Address:

(May be post office box)

650 Phipps Blvd Apt S107

Atlanta, GA 30326

**C. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

Deborah Ann Thompson

New Registered Office Address:

11647 SW CR 240

Enter Florida street address

Lake City

City

Florida 32024

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.*

Deborah Ann Thompson

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:**

| <u>Title</u>    | <u>Name</u>        | <u>Address</u>                                 | <u>Type of Action</u>  |
|-----------------|--------------------|--|--|
| General Partner | Deborah A Thompson | 2305 Labista Woods Dr.<br>Tucker, GA 30084     | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove |
| General Partner | David A Johnson    | 3512 Putnam Road<br>St. Augustine, FL<br>32086 | <input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove |
|                 |                    |  | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|                 |                    |  | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|                 |                    |  | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|                 |                    |  | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|                 |                    |  | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|                 |                    |  | <input type="checkbox"/> Add<br><input type="checkbox"/> 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 information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Effective date, if other than the date of filing: \_\_\_\_\_

*(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)*

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**Signature(s) of a general partner or all general partners\*:**

(\*NOTE: Only one current general partner is required to sign this document unless the limited partnership is adding or removing a "limited liability limited partnership" election statement. Chapter 620, F.S., requires all general partners to sign when adding or removing a "limited liability limited partnership" election statement.)

Deborah Ann Thompson

General Partner

**Signature(s) of all new or dissociating general partner(s), if any:**

David A Johnson

Deceased

Deborah Ann Thompson

New General Partner

Filing Fee: \$52.50  
Certified Copy (optional): \$52.50  
Certificate of Status (optional): \$8.75