Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Email Address: geoff@deloachplanning.com

### LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION VLI FAMILY LIMITED PARTNERSHIP

Certificate of Status	1
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## CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

VLI Family Limited Partnership		
Insert name currently or	ifile with Florida De	epartment of State
Pursuant to the provisions of section 620.1202. limited liability limited partnership, whose cert April 13, 1998	ificate was filed Florida document	with the Florida Department of State on number A98000000912
This amendment is submitted to amend the followin	<b>ਫ</b> :	
A. If amending name, <u>enter the new name of there:</u>	e limited partner	ship or limited liability limited partnership
VLI Family Limited Liability Limited Partnership New name must be distingt	rishable and contain	an acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Partne Acceptable Limited Liability Limited Partnership suffixe	ership, Limited, L.P., vs: Limited Liability	LP, or Ltd. Limited Partnership, L.L.L.P. or LLLP.
B. If amending mailing address and/or prin principal office address here:	cipal office add	ress, enter new mailing address and/or
New Principal Office Address: (Must be STREET address)		
New Mailing Address: (May be post office box)		
C. If amending the registered agent and/or regist registered agent and/or the new registered office	tered office addres address here:	ss on our records, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:	Enter	Florida street address
<del></del>	City	. Florida <u>Zip Code</u>

Page 1 of 3

#### 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.

1000 1000	Commission of March Davidson and Amount
- II 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>	Name	Address	Type of Action
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			SECONO CI -
<del></del>			Q Add N
			DiAdd G
			☐ 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.)

See attached Exhibit A		
Effective date, if other than the da	nte of filing:	r the date this document is tiled by the Florida Department of
Effective date cannot be prior to nor m State)	re than 90 days afte	r the date this document is tiled by the Florida Department of
		licable statutory filing requirements, this date will not
be listed as the document's effective dat	e on the Department	of State 8 records.
Signature(s) of a general partne	r or all general	partners*:
emoving a "limited liability limited par-	mership" election sta	to this document unless the limited partnership is adding or dement. Chapter 620, F.S., requires all general partners to sign
when adding or removing a "limited liah	ility limited partners	thip" election statement.)
. m		
7////		
EB CONOLEY		
	<del></del>	
Signature(s) of all new or dissoc	iating general pa	artner(s), if any:
	<del> </del>	
filing Fee:	\$52.50	
Certified Copy (optional):	\$52.50	
lertificate of Status (optional):	\$8.75	

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VLI Family Limited Partnership

Certificate of Amendment

# CERTIFICATE OF AMENDMENT VLI FAMILY LIMITED PARTNERSHIP (DOCUMENT NUMBER: A98000000912) EXHIBIT A

The undersigned hereby revoke the introductory paragraph and the first six paragraphs of the Certificate of Limited Partnership for VLI FAMILY LIMITED PARTNERSHIP in their entirety and replace them with the following text:

We, the undersigned, desiring for a limited liability limited partnership pursuant to the Florida Revised Uniform Limited Partnership Act, do hereby certify:

- (1) The name of the limited partnership is VLI FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP and the limited partnership elects to be a limited liability limited partnership.
- (2) The address of the office of the limited liability limited partnership is as follows:

VLI FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP 931 Oakland Avenue Oakland, FL 34760

(3) The name and address of the agent for service of process is as follows:

F. B. Conoley, II 931 Oakland Avenue Oakland, FL 34760

(4) The name and business address of each general partner are as follows:

Name E. B. Conoley, II Business Address 931 Oakland Avenue Oakland, FL 34760

E. B. Conoley, II is the only general partner.

(5) The mailing address for the limited liability limited partnership is as follows:

P.O. Box 771399 Winter Garden, Florida 34777-1399

#### VLI Family Limited Partnership

Certificate of Amendment

(6) The term of the limited liability limited partnership shall continue until dissolved and terminated in accordance with the Florida Revised Uniform Limited Partnership Act or the Lamited Liability Limited Partnership Agreement of the limited liability limited partnership.