

A98000001243

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

N. O. APR 23 2009

**URBAN J.W. PATTERSON, P.A.**

**Attorney at Law**  
82681 Overseas Highway  
P.O. Box 783  
Islamorada, Florida 33036

Telephone: (305) 664-5065

Facsimile: (305) 664-2633

April 20, 2009

Via: U.S. Postal Service Express Mail  
EH 408687609 US

Department of State  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Re: The M.M.P. & L.P.O. Limited Partnership  
Document Number: A98000001243

Enclosed please find the following original, signed, documents and fees which are submitted for filing:

Certificate of Amendment to Certificate of Limited Partnership	\$ 52.50
Statement of Dissociation (Mr. Papy, individually)	52.50
Statement of Dissociation (Mr. Papy as Trustee)	52.50
Amendment to Partnership Statement	<u>25.00</u>
Total Fees:	\$ 182.50

Please return all correspondence concerning this partnership to:

Urban J.W. Patterson  
Urban J.W. Patterson, P.A.  
P.O. Box 783  
Islamorada, FL 33037

If there are any questions or need for further information concerning this matter, please call Urban J.W. Patterson at (305) 664-5065

Very truly yours,

  
URBAN J.W. PATTERSON, P.A.

Urban J.W. Patterson  
UJWP:jm  
Enclosures

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CERTIFICATE OF AMENDMENT  
TO  
CERTIFICATE OF LIMITED PARTNERSHIP  
OF

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

THE M.M.P. & L.P.O. LIMITED PARTNERSHIP

(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 MAY 18, 1998, assigned Florida document number A98000001243, 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 LLLP.*

**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)

82681 OVERSEAS HIGHWAY  
ISLAMORADA, FLORIDA 33036

New Mailing Address:  
(May be post office box)

POST OFFICE BOX 783  
ISLAMORADA, FLORIDA 33036

**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:

URBAN J.W. PATTERSON

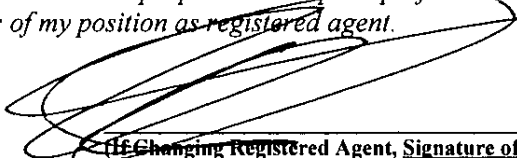
New Registered Office Address:

82681 OVERSEAS HIGHWAY  
(Enter Florida street address)

ISLAMORADA, Florida 33036  
(City) (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:**

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	<u>LISA PAPY OUTLAW</u>	<u>POST OFFICE BOX 1376</u> <u>ALPINE, TEXAS 79831</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
_____	<u>MARILYN MALPAS PAPY</u>	<u>907 SOUTH STREET</u> <u>KEY WEST, FLORIDA 33040</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
_____	<u>BERNIE C. PAPY, III</u>	<u>907 SOUTH STREET</u> <u>KEY WEST, FLORIDA 33040</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <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.)

**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.)

*Lisa P. Ouelaw*  
*Bernie C. Papy III*

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

*Lisa P. Ouelaw*  
*Bernie C. Papy III*

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