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Certified Copies	Certificates	of Status
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2017 JUL 24 PH 3: 34

W. HARRIE

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:	JACK R.	CONNER PROPERTIES	S, LTD.	
	Nan	ne of Florida Limited Part	nership or Limited Liability	y Limited Partnership
The enclosed	Certific	ate of Amendment an	d fee(s) are submitted	for filing.
Please return	all corre	spondence concernin	g this matter to:	
<u></u>	larru	S. Connei		
Jack	R.	Contact Person CONNER Proj	perhes, Ud.	
42	14 (Firm/Company Nest Azec	perhes, Utd. ele Street	
		Address		
To	mpc	ty, State and Zip Code	609	
	` Ci	ty, State and Zip Code		
ones	not d	ocohot mai	il. com	
E-mail ad	dress: (to t	be used for future annual i	report notification)	
For further in	ıformatic	on concerning this ma	itter, please call:	
Harry	5.0	lonner	at (<u>BI3</u>) 31 Area Code and Davi	182119
Name	of Contac	t Person	Area Code and Days	ime Telephone Number
Enclosed is a	check fo	or the following amou	ınt:	
\$52.50 Filin	g 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 AT	DDRESS	5:	MAILING A	ADDRESS:
Registration			Registration	
Division of C	•	ons	Division of C P. O. Box 63	Corporations .
Clifton Build 2661 Execut		er Circle	Tallahassee,	
Tallahassee,				

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

JACK R. CONNER PROPERTIES, LTD.	
Insert name currently on	file with Florida Department of State
limited liability limited partnership, whose cert	Florida Statutes, this Florida limited partnership or ifficate was filed with the Florida Department of State on Torida document number A980000 2409. To its certificate of limited partnership.
This amendment is submitted to amend the following	g:
A. If amending name, enter the new name of the here:	e limited partnership or limited liability limited partnership
New name must be distingu	ishable and contain an acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Partne Acceptable Limited Liability Limited Partnership suffixes	rship, Limited, L.P., LP. or Ltd. s: Limited Liability Limited Partnership, L.L.L.P. or LLLP.
B. If amending mailing address and/or pringerincipal office address here:	cipal office address, enter new mailing address and/or
New Principal Office Address: (Must be STREET address)	
New Mailing Address: (May be post office box)	24 R
C. If amending the registered agent and/or reginer region region registered agent and/or the new registered of	stered office address on our records, enter the name of the
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	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, Si	gnature of	New Registe	red 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>	Address	Type of Action
GP	Jack R. Conner, Jr.	DECEASED	
GP	Brenna L. Conner	10135 West Dartmouth Place 10-204 Lakewood, CO 80227	_ Add _ Remove
GP	Jack R. Conner III	4305 S. Coolidge Avenue Tampa, Florida 33611	_ Add □ Remove
GP	Corey S. Conner	4400 West Spruce Street Apt. 278 Tampa, Florida 33607	_ Add _ Remove
			D Add CALL 2
			Rumove +
			ည်း ယု 🤲

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.)

Effective date, if other than the date of filing:	
Effective date connut be prior to nor more than 90 days aft State.)	ler the date this document is filed by the Florida Department of
Note: If the date inserted in this block does not meet the ap-	
be listed as the document's effective date on the Departmen	u of State's records.
Signature(s) of a general partner or all general	partners*:
	ign this document unless the limited partnership is adding or
emoving a "limited liability limited parmership" election st	tatement. Chapter 620, F.S., requires all general partners to si
when adding or removing a "limited liability limited partner	rahip" election statement.)
) i e.	Pamela Spring Conner, General Partner
time la Stome	Transla Spring Country, October Pardier
Signature(s) of all new or dissociating general p	partner(s), if any:
Signature(s) of all new or dissociating general p	
Signature(s) of all new or dissociating general p	Brenna L. Conner
Signature(s) of all new or dissociating general p	
Signature(s) of all new or dissociating general p	Brenna L. Conner Jack R. Conner III
Signature(s) of all new or dissociating general p	Brenna L. Conner
ilenature(s) of all new or dissociating general p	Brenna L. Conner Jack R. Conner III
Signature(s) of all new or dissociating general p	Brenna L. Conner Lack R. Conner III
Signature(s) of all new or dissociating general p	Brenna L. Conner Lack R. Conner III

Page 3 of 3

2017 JUL 24 PH 3: 34