

A98 00000 2409

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

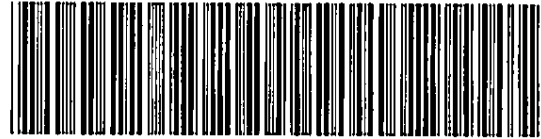
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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08/09/21--01016--016 **52.50

2021 SEP -1 AM 10:18

FILED

Amend

SEP 01 2021

ALBRITTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Jack R. Conner Properties, 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:

Harry S. Conner

Contact Person

Firm/Company

606 S. Lois Avenue

Address

Tampa, Florida 33609

City, State and Zip Code

cheryl.bvd83@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cheryl Conner

Name of Contact Person

at (813) 3182119

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

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 21, 2021

HARRY S. CONNER
606 S. LOIS AVENUE
TAMPA, FL 33609

SUBJECT: JACK R. CONNER PROPERTIES, LTD.
Ref. Number: A98000002409

We have received your document for JACK R. CONNER PROPERTIES, 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):

The document must be signed by all of the general partners.

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) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 921A00020087

CERTIFICATE OF AMENDMENT
TO
CERTIFICATE OF LIMITED PARTNERSHIP
OF

Jack R. Conner Properties, Ltd.

Insert name currently on file with Florida Department of State

FILED
2021 SEP -1 AM 10:18

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 10/21/1998, assigned Florida document number A98000002409, 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)

606 S. Lois Avenue
Tampa, FL 33609

New Mailing Address:
(May be post office box)

606 S. Lois Avenue
Tampa, FL 33609

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:

Harry S. Conner

New Registered Office Address:

606 S. Lois Avenue

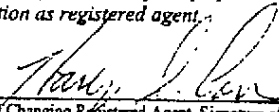
Enter Florida street address

Tampa
City

Florida 33609
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>
GP	Jack R. Conner	4214 West Azeele Tampa, FL 33609	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
GP	Elizabeth S. Conner Revocable Trust	4214 West Azeele Tampa, FL 33609	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
GP	Brenna Leigh Conner	* 6528 West Clifton Littleton, CO 80128	Place <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
GP	Jack R. Conner III	* 5350 Bridge Street Apt 3308 Tampa, FL 33611	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
GP	Corey S. Conner	* 5350 Bridge Street Apt 3308 Tampa, FL 33611	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

* current addresses

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.)

Michael S. Conner GP New Address:

23410 White Magnolia Place Apt. 15-208 Lutz, FL 33549

Pamela Conner O'Brien GP New Address:

4705 Interlachen Lane Austin TX 78747

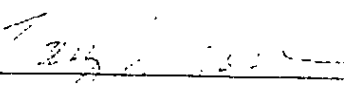
Effective date, if other than the date of filing:

(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*:

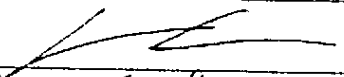
(*NOTE: Only one current general partner is required to sign this document unless the limited partnership is adding or removing a "limited liability limited partnership" election statement. Chapter 620, F.S., requires all general partners to sign when adding or removing a "limited liability limited partnership"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


MICHAEL S. CONNER

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


Brenna Leigh Conner


Jack R. Conner III


Corey S. Conner

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

F. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Michael S. Conner GP New Address:

23410 White Magnolia Place Apt. 15-208 Lutz, FL 33549

Pamela Conner O'Brien GP New Address:

4705 Interlachen Lane Austin TX 78747

Effective date, if other than the date of filing:

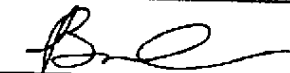
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

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.

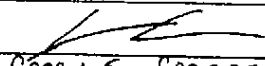
Signature(s) of a general partner or all general partners*:

(*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.)

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



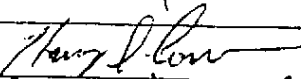
Brenna Leigh Conner



Corey S. Conner



Jack R. Conner III



Representative of Jack R. Conner,
Harry S. Conner deceased



Trustee of Elizabeth
S. Conner Revocable Trust
Harry S. Conner

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