

A98000002721

(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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Office Use Only

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SEP 19 2012

EXAMINER



000239611210

09/18/12--01011--010 **61.25

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 SEP 18 PM 12:40



LOUIS C. ANDERSON, J.D., P.L.
Corporate Center-by-the-Sea
224 Commercial Boulevard, Suite 310
Lauderdale-by-the-Sea, FL 33308-4443
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14 September 2012

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Via Federal Express

12 SEP 19 PM 12:40
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
RECEIVED

Re: ***Certificate of Amendment
ARRP Family Limited Partnership, LTD***

Dear Sir or Madam:

Enclosed is a Certificate of Amendment and filing fee for the purpose of:

- 1) Converting the referenced limited partnership to a limited liability limited partnership ("LLLP") and changing the suffix to LLLP;
- 2) Making the duration of the limited partnership perpetual; and
- 3) Electing that the partnership be subject to the Florida Revised Uniform Limited Partnership act of 2005.

Please file the Amendment and return the Certificate of Status in the enclosed, self addressed, stamped envelope. Thank you for your assistance.

Sincerely,

LOUIS C. ANDERSON, J.D., P.L.

LOUIS C. ANDERSON, ESQ.

LCA/jmc

Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ARRP Family Limited 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:

Louis C. Anderson, Esq.

Contact Person

Louis C. Anderson, J.D. P.L.

Firm/Company

224 Commercial Blvd., #310

Address

Lauderdale by the Sea, FL 33308

City, State and Zip Code

pmc190ftl@aol.com

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

For further information concerning this matter, please call:

Louis C. Anderson

Name of Contact Person

at (954)

772-8050

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

SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 SEP 18 PM 12:40

CERTIFICATE OF AMENDMENT
TO
CERTIFICATE OF LIMITED PARTNERSHIP
OF

ARRP Family Limited Partnership, LTD.

Insert name currently on file with Florida Department of State

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 SEP 18 PM 12:40

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 December 7, 1998, assigned Florida document number A98000002721, 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:

ARRP Family Limited Partnership, LLLP

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)

New Mailing Address:

(May be post office box)

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:

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, 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>
_____	_____	_____ _____ _____	<input type="checkbox"/> Add <input 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
_____	_____	_____ _____ _____	<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.)*

Section 6 of the Certificate of Limited Partnership is amended to read as follows:

"6. The Limited Partnership will have a perpetual duration.

The Limited Partnership elects to be subject to the Florida Revised Uniform Limited Partnership Act of 2005."

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.)

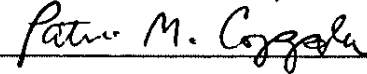
Robert C. Coppola

x



Patrice M. Coppola

x



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

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