

A99 0000000344

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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STATE OF CALIFORNIA
FALL 2021

2021 OCT -1 PM 12:45

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sholey I, LTD. Change of General Partner and Registered Agent

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:

Jay Schoenbaum

Contact Person

JAMZ Capital Management, LLC

Firm/Company

37 Tenorio Road

Address

Corrales, NM 87048

City, State and Zip Code

jschoe3481@aol.com

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

2001 OCT -1 PM 3:31

For further information concerning this matter, please call:

Jay Schoenbaum

at (505) 369-8820

Name of Contact Person

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

CERTIFICATE OF AMENDMENT
TO
CERTIFICATE OF LIMITED PARTNERSHIP
OF

Sholey I, LTD.

Insert name currently on file with Florida Department of State

2021 OCT - 1 PM 12:45
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TALLAHASSEE

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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 March 4, 1997, assigned Florida document number A99000000344, 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:

N/A

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)

37 Tenorio Road
Corrales NM 87048

New Mailing Address:
(May be post office box)

37 Tenorio Road
Corrales, NM 87048

C. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:

Name of New Registered Agent:

InTrust Advisors, Inc.

New Registered Office Address:

114 S Woodlynne Ave

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

Jeffrey J. Dieckes President

D. If amending the general partner(s), enter the name and business address of each general partner being added or removed from our records:

Innovative
IT Solutions
Inc.

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	J.S. Schoenbaum Capital Mgmt	P. O. Box 15109 Clearwater, FL 33766-5109	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
_____	JAMZ Capital Management LLC	37 Tenorio Road Corrales, NM 87048	<input checked="" 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.)

Effective date, if other than the date of filing: _____

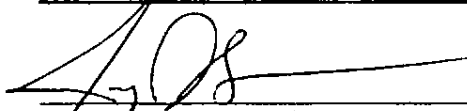
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

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*:

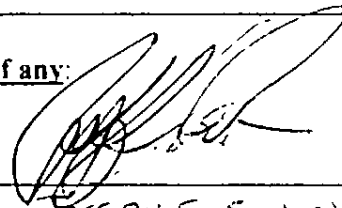
(*NOTE: Only one current general partner is required to sign this document unless the limited partnership is adding or removing a "limited liability limited partnership" election statement. Chapter 620, F.S., requires all general partners to sign when adding or removing a "limited liability limited partnership"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

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



JAY SCHOENBAUM
MANAGER MEMBER JAMZ CAPITAL MANAGEMENT
LLC

NEW GENERAL PARTNER



JEFFERY F. SCHOENBAUM
PRESIDENT / DIRECTOR

J.S. SCHOENBAUM CAPITAL
MANAGEMENT, INC., DISSOCIATING
GENERAL PARTNER

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