

A 99000000748

Gainesville Downtown Inn Venture  
111 West Fortune St.  
Tampa, FL 33602

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

June 29, 2005

GAINESVILLE DOWNTOWN INN VENTURE, LTD.  
111 WEST FORTUNE ST.  
TAMPA, FL 33602

SUBJECT: GAINESVILLE DOWNTOWN INN VENTURE, LTD.  
Ref. Number: A99000000748

We have received your document for GAINESVILLE DOWNTOWN INN VENTURE, LTD. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form and fee you submitted were for a general partnership, but your entity is a limited partnership. Please complete and return the enclosed form along with the remaining \$10 due.

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) 245-6958.

Lee Rivers  
Document Specialist

Letter Number: 505A00043968

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FLORIDA

**LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED  
OFFICE OR REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes, the undersigned limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. Gainesville Downtown Inn Venture, LTD.  
Name of the limited partnership
2. 5/10/99 3. A99000000748  
Date of filing/registration in Florida Document number assigned
4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:
- David H. Callen  
Name  
111 W. Fortune Street  
Address  
Tampa, FL 33602  
City, State and Zip
5. The name and address of the new registered agent and/or office:
- Andre P. Callen  
Name  
111 W. Fortune Street  
Florida street address (P.O. Box not acceptable)  
Tampa, FL 33602  
City, State and Zip

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TALLAHASSEE, FLORIDA

6. Such change(s) was/were authorized by the general partners.

  
Signature of General Partner Pres. G.P.

*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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the limited partnership has been notified in writing of this change.*

  
Signature of Registered Agent

**Make checks payable to Florida Department of State and mail to:  
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314  
Filing Fee: \$35.00**