

A99000000767

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

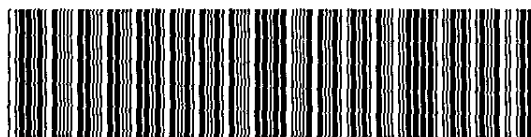
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05 JUN -3 AM 8:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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CORP DIRECT AGENTS, INC. (formerly CCRS)
103 N. MERIDIAN STREET, LOWER LEVEL
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

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TALLAHASSEE, FLORIDA

CONTACT: KATIE WONSCH

DATE: 06/03/2005

REF. #: 000174.38785

CORP. NAME: THE KESERT FAMILY LIMITED PARTNERSHIP

- | | | |
|--|---|--|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input checked="" type="checkbox"/> LIMITED PARTNERSHIP | <input type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input type="checkbox"/> OTHER: | | |

STATE FEES PREPAID WITH CHECK# 512842 FOR \$ 52.50

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ COST LIMIT: \$ _____

PLEASE RETURN:

- | | | |
|--|---|--|
| <input type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input checked="" type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials

AMENDMENT TO THE
CERTIFICATE OF LIMITED PARTNERSHIP
OF
THE KESERT FAMILY LIMITED PARTNERSHIP,
a Florida limited partnership

FILED
05 JUN -3 AM 8:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, constituting the General Partner of THE KESERT FAMILY LIMITED PARTNERSHIP, a Florida limited partnership, whose Certificate of Limited Partnership was filed with the Secretary of State, State of Florida on May 12, 1999, hereby amends said Certificate of Limited Partnership of THE KESERT FAMILY LIMITED PARTNERSHIP, a Florida limited partnership, as follows:

1. General Partner. The term "General Partner" shall mean Joyce Hicks, as Trustee of the Joyce Hicks Revocable Trust u/a/d March 17, 2005, or any other person or entity admitted as a General Partner by consenting to be bound by the terms of this Agreement. A General Partner may be both a General Partner and a Limited Partner. The address of the General Partner is: 2525 Gulf of Mexico Drive, #14D, Longboat Key, FL 34228.

1. Except as expressly provided herein, all of the terms and provisions of the Certificate of Limited Partnership shall remain in full force and effect and are hereby ratified and confirmed.

2. The execution of this Amendment by the undersigned constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

IN WITNESS WHEREOF, the undersigned General Partner of the Partnership have consented to the execution of this Amendment to the Certificate of Limited Partnership of THE KESERT FAMILY LIMITED PARTNERSHIP., a Florida limited partnership below, on the 27 day of May 2005.

WITNESSES:

THE KESERT FAMILY LIMITED
PARTNERSHIP, a Florida limited partnership

Shayne A. Roggs
Print Name SHAYNE A. ROGGS

By: Joyce Hicks
Joyce Hicks, as Trustee of the Joyce Hicks
Revocable Trust u/a/d March 17, 2005

Leann A. Smith
Print Name Leann A. Smith

"GENERAL PARTNER" (new)