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# Division of 000000

## Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

#### **Electronic Filing Cover Sheet**

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#### (((H02000110907 1)))

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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

#### AMY J. PATTERSON

: CNL FINANCIAL GROUP, INC. Account Name

Account Number: 113615003626 : (407)650-1000

Fax Number : (407)650-1065

### LIMITED PARTNERSHIP AMENDMENT

JMS & DLS INSURANCE PARTNERSHIP, LTD.

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$557.90

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#### SUPPLEMENTAL AFFIDAVIT OF LIMITED PARTNERS' CONTRIBUTION

Pursuant to the provisions of the Florida Revised Uniform Limited Partnership Act,

Florida Statutes, Section 620.112, the undersigned, after first being duly sworn, deposes and says
that the capital contributions of the Limited Partners of JMS & DLS INSURANCE

PARTNERSHIP, LTD. (Document No.: A99000000853) have been increased by Seventy Two
Thousand, Two Hundred Dollars and Forty Cents (\$72, 200.40) from Nine Hundred Dollars

(\$900.00) to Seventy Three Thousand, One Hundred Dollars and Forty Cents (\$73,100.40).

No Limited Partner shall at any time be required to make any contribution to the Partnership in addition to the amount which he has contributed.

Dated: April 3, 2002.

Under penalties of perjury I declare that I have read the foregoing and that the facts are true to the best of my knowledge and belief.

GENERAL PARTNER:

INSURANCE PARTNERSHIP

MANAGER #3, LLC, a Florid Limited Liability Company

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