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(Re	questor's Name)	
bA)	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	<u> </u>
Certified Copies	_ Certificates	of Status
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13 APR 30 PM 6: 29
SECRETIONS OF STATE



COVER LETTER

	stration Section sion of Corporations		
SUBJECT:	Wescott F	Family Limited Part	nership
	Name of Florida Limited Pa	artnership or Limited Liabilit	ty Limited Partnership
The enclosed	d Certificate of Amendment a	and fee(s) are submitted	for filing.
Please return	all correspondence concern	ing this matter to:	L'ALL PK
	Michael A. Pyle		
	Contact Person		70
	Pyle & Dellinger, PL		\Q ₁
	Firm/Company		
1	655 N. Clyde Morris Blvd.	, Ste. 1	
·	Address		
	Daytona Beach, FL 321	117	
	City, State and Zip Code		
	mikep@pylelaw.com	า	
E-mail ad	ldress: (to be used for future annua	l report notification)	
For further in	nformation concerning this n	natter, please call:	
	Michael A. Pyle	at (<u>386</u>)	615-9007
Name	of Contact Person	Area Code and Day	time Telephone Number
Enclosed is a	a check for the following amo	ount:	
\$52.50 Filin	ng Fee \$\int_\$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 A	DDRESS:	MAILING A	ADDRESS:
Registration		Registration	
Division of C	•		Corporations
Clifton Build		P. O. Box 63	
Tallahassee,	ive Center Circle FL 32301	Tallahassee,	FL 32314

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

13 MR 30 PK 3: 30

Wescott Family Limited Partnership

Insert name currently on file with Florida Department of State

Pursuant to the provisions of section 620.1202, Florinited liability limited partnership, whose certific June 30, 1999, assigned Florinited Florinited Pursuant Pursu	ate was filed with the	ne Florida Department of State on
adopts the following certificate of amendment to i		
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the li</u> here:	mited partnership or	limited liability limited partnership
New name must be distinguisha	able and contain an acce	ptable suffix.
Acceptable Limited Partnership suffixes: Limited Partnershi Acceptable Limited Liability Limited Partnership suffixes: L		
B. If amending mailing address and/or princip <u>principal office address here</u> :	al office address, <u>e</u>	nter new mailing address and/or
New Principal Office Address: (Must be STREET address)		
New Mailing Address: (May be post office box)		
C. If amending the registered agent and/or registeness registered agent and/or the new registered office		our records, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida	i 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 partne	r(s), ente	r the n	ame and	business	address of	each	general	partner	being
<u>ado</u>	<u>led or removed from our record</u>	;								

<u>Title</u>	<u>Name</u>	Address	Type of Action		
	John W. Wescott	1655 N. Clyde Morris Blvd Suite 1 Daytona Beach, FL 32117	 ▼ Remove		
	John W. Wescott Revocable trust Jated June 14,1999	1655 N. Clyde Morris Blvd Suite 1 Daytona Beach, FL 32117	Remove		
			Add Remove		
			_ Add _ Remove		
			Add Remove		
			_		
	partnership or limited liability ip" status, enter change here:	limited partnership is amend	ding its "limited liab		
This Limited	d Partnership hereby elects to be	a "Limited Liability Limited Pa	rtnership."		
This Limits	d Partnershin hereby removes its	. 461 imited Liability Limited Daw	tnovahin?? ototus		

(NOTE: If adding or removing" limited liability limited partnership" status, all general partners must sign this amendment.)

fective date, if other than the date of filing:	
ffective date cannot be prior to nor more than 90 days after to the.)	the date this document is filed by the Florida Department of
ignáture(s) of a general partner or all general pa	artners*:
NOTE: Only one current general partner is required to sign to moving a "limited liability limited partnership" election states then adding or removing a "limited liability limited partnership".	ement. Chapter 620, F.S., requires all general partners to sign
gnature(s) of all new or dissociating general par	rtner(s), if any:
John W & Scott by	
Grephanie Isaacsonas	
Age'nt under POA	m. ONO as Trustee 7,
Jan as	Millot A DVIE Tour
trustee of John W. Wescott Bevocable Trust	MICHAEL A. PYLE
iling Fee: \$52.50 Certified Copy (optional): \$52.50	
erimen i onvioningil' 33/30	