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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

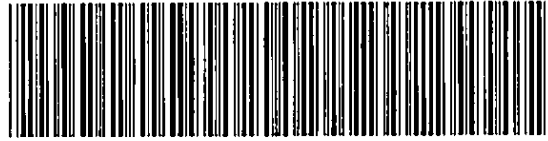
(Document Number) /

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Signatures

Office Use Only



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08/08/23--01029--033 **52.50

FILED
2023 MAY -8 AM 9:01
SECRETARY OF STATE
TALLAHASSEE, FL

AUG 29 2023

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LAIRD A. LILE

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April 28, 2023

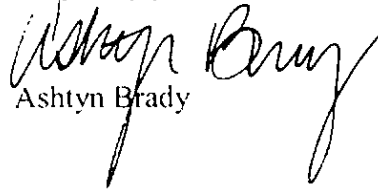
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Stanley J. Norton Limited Partnership

Dear Sir or Madam:

Please find enclosed the Amendment to Certificate of Limited Partnership for the above referenced entity. Also enclosed is check #4354 in the amount of \$52.50 for the filing fee of the Amendment.

Very truly yours,


Ashtyn Brady

Enclosures

cc: Ms. Kirsten E. Norton (w/enc.) via E-Mail
Laird A. Lile, Esq.

FILED
2023 MAY -8 AM 9:01
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Stanley J. Norton Limited Partnership
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:

Laird A. Lile

 Contact Person

Laird A. Lile, PLLC

 Firm/Company

3033 Riviera Dr., Suite 104

 Address

Naples, FL 34103

 City, State and Zip Code

lile@lairdalile.com

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

FILED
 2023 MAY -8 AM 9:01
 SECRETARY OF STATE
 TALLAHASSEE, FL

For further information concerning this matter, please call:

Laird Lile _____ at (239) 649-7778
 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 15, 2023

LAIRD A. LILE
3033 RIVIERA DR.
SUITE 104
NAPLES, FL 34103

SUBJECT: STANLEY J. NORTON LIMITED PARTNERSHIP
Ref. Number: A99000001574

We have received your document for STANLEY J. NORTON LIMITED PARTNERSHIP and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

All General Parnter(s) removing themselves must sign.

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) 245-6050.

Anissa Butler
Regulatory Specialist II

Letter Number: 823A00018672

**CERTIFICATE OF AMENDMENT
TO
CERTIFICATE OF LIMITED PARTNERSHIP
OF**

FILED
2023 MAY -8 AM 9:01
SECRETARY OF STATE
TALLAHASSEE, FL

Stanley J. Norton Limited Partnership

Insert name currently on file with Florida Department of State

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 September 27, 1999, assigned Florida document number A99000001574, 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:

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)

New Mailing Address:

(May be post office box)

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

Name of New Registered Agent:

New Registered Office Address:

Enter Florida 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 partner(s), enter the name and business address of each general partner being added or removed from our records:

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
GP	Stanley J. Norton, Jr. <i>Deceased</i>	5 River Road West Newbury, MA 01985	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
GP	Stanley J. Norton, Jr. <i>Deceased</i>	5 River Road West Newbury, MA 01985	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
GP	Noreen M. Norton <i>Deceased</i>	5 River Road West Newbury, MA 01985	<input type="checkbox"/> Add <input checked="" 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.)

DocuSigned by:
Kirsten Norton
01EAB40059F485

4/28/2023

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

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