A99000001720

(Re	equestor's Name)	
(Ac	dress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bı	ısiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



200296408832

03/10/17--01025--014 **52.50

PILEU 2011 HAR 10 PH 2: 21 SECRETARY OF STATE

K. SALY MAR 13 2017

COVER LETTER

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP



Venture Hospitality Partners LTb
Insert name currently on file with Florida Department of State

Pursuant to the provisions of section 620.1202, limited liability limited partnership, whose certing the section of the provisions of section 620.1202, limited liability limited partnership, whose certificate of assigned Fladopts the following certificate of amendment to	ficate was filed w lorida document n	ith the Florida Department of State on number <u>H9900000/720</u> ,
This amendment is submitted to amend the following	;	
A. If amending name, enter the new name of the	limited partnersh	ip or limited liability limited partnership
<u>here</u> :		
New name must be distingui	shable and contain ar	acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Partner Acceptable Limited Liability Limited Partnership suffixes		
B. If amending mailing address and/or princ principal office address here:	cipal office addre	ess, enter 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 registered agent and/or the new registered of		ess on our records, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	Enter F	lorida street address
		, Florida
	City	Zip Code

2017 MAR 10 TALLAHASSEF OF further agree to F. F. F. F. F. F. ce of my duties, and	E STO
New Registered Agent	
general partner bein	g
e of Action	
Add ☑ Remove	
Add Remove	
Add Remove	
Add Remove	
Add Remove	
Add Remove	

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. If comply with the provisions of all statutes relative to the proper and complete performance am familiar with and accept the obligations of my position as registered agent.

If Changing Registered Agent, Signature of

D. If amending the general	partner(s), <u>enter the nam</u>	<u>e and business address c</u>	of each general partner being
added or removed from our r			

Title	Name	Address	Type of Action
<u>ĢP</u>	Southern Ventures OF OKAloosa County, Inc. Southern Ventures OF OKAloosa County LLC	819 Pine Sale Rh. Fort Walton Beach FL 32547	Add Remove
<u>GP</u>	Southern Ventures OF OKaloosa County LLC	819 Pinesgle RD. Fort Walton Beach FL 32547	Add Remove
			☐ Add ☐ Remove
			Add Remove
			Add Remove
			Add Remove
	d partnership or limited liability ship" status, enter change here:	limited partnership is amendi	ng its "limited liability
This Limi	ted Partnership hereby elects to be	a "Limited Liability Limited Par	tnership."
This Limi	ted Partnership hereby removes its	"Limited Liability Limited Partr	ership" status.

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

	7
	22 30
	是一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个
	Ag 3
Effective date, if other than the date of filing:	200
	fler the date this document is filed by the Florida Department o
State.)	- Francisco - Fran
Signature(s) of a general partner or all genera	l partners*:
(*NOTE: Only one current general partner is required to s	sign this document unless the limited partnership is adding or statement. Chapter 620, F.S., requires all general partners to si
when adding or removing a "limited liability limited partner	statement. Unapter 620, r.s., requires all general partners to si
May 1	
	9 - 10
MINIO	Lowell C. Laisma
1 Well	
	·
Standard A. A. A. B. B. A.	
Signature(s) of all new or dissociating general	partner(s), if any:
	Louell C Laison C
	V pour C
- Julian -	
- Julia VI	
- Julia VI	
Filing Fee: \$52.50.	
Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	