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Account Name : BLALOCK, WALTERS, HELD & JOHNSON, P.A.

Account Number : 076666003611 Phone : (941)748-0100 Fax Number : (941)745-2093

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## LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION JKR FAMILY LIMITED PARTNERSHIP, LLLP

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AUG 24 2023

## COVER LETTER

TO: Regi Divi		lection orporations			
SUBJECT:	JKR FAM	ILY LIMITED PARTNE	RSHIP, LLL	Р	
	Nar	ne of Florida Limited Part	mership or Li	mited Liabilit	y Limited Partnership
The enclosed	d Certific	ate of Amendment an	nd fee(s) are	submitted	for filing.
Please return	all corre	espondence concernin	g this matt	er to:	
EILEEN PEN	NINGTON				
		Contact Person			
BLALOCK W	ALTERS,	P.A.			
		Firm/Company			
802 HTH STE	REET WES	7			
	•	Address			
BRADENTON	R, FLORID	A 34205			
	C	ty, State and Zip Code			
epennington@	)blalockwa	lters.com			
E-mail ac	ldress: (to b	oc used for future annual)	eport notifies	ition)	
For further is	nformatic	on concerning this ma	tter, please	cail:	
EILEEN PENNINGTON 941		941 at (	748-0	ime Telephone Number	
Name	el Contac	l Person	Area C	Tode and Dayt	ime Telephone Number
Enclosed is	a check fo	or the following amor	ınt:		
☐ \$52.50 Fillin	ig Fee	☐S61.25 Filing Fee and Certificate of Status	口\$105.00 and Certifi		☐\$113.75 Filing Fee, Certified Copy, and Certificate of Status
Mailing Add Registration Division of C P.O. Box 63 Tallahassee,	Section Corporati 27		R D T 2-	he Centre o	Section Corporations f Tallahassee troe Street, Suite 810

## CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

JKR FAMILY LIMITED PARTNERS Insert name curre		o with Florida Departmen	nt of State		
Pursuant to the provisions of section 620. limited liability limited partnership, whos 11/01/1999 , assigned, adopts the following certificate of amend	se certific gn <mark>ed</mark> Flor	ate was filed with thida document number	c Florida D r <u>A9900000</u>	epartment of S	
This amendment is submitted to amend the following	llowing:				
A. If amending name, enter the new name here:	e of the li	mited partnership or	limited linb	ility limited pa	rtnership
New name must be d	listinguisha	able and contain an accep	table suffix.		
Acceptable Limited Partnership suffixes: Limited Acceptable Limited Liability Limited Partnership  B. If amending mailing address and/or principal office address here:	xuffixex; L	imited Liability Limited i	Partnership, .		
New Principal Office Addr	<u>'ess:</u>			023	_
(Must be STREET address)  New Mailing Address: (May be post office box)		P.O. BOX 496055 PORT CHARLOTTE, F 33949	LORIDA	AUG 24 AM 71 21	APPROYED FILED
C. If amending the registered agent and/or registered agent and/or the new registered of			r records, <u>e</u>	nter the name o	f the new
Name of New Registered Agent:	BLALO	CK WALTERS, P.A.			
New Registered Office Address:	802 HT	II STREET WEST Enter Florida	street addre	SS	
	BRADE	МОТИ	, Florida [	34205	
		City	-	Zip Code	

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

		II Changing Registered Age	nt. Signature of New Registered Are
ed or remov	the general partner(s), ente ed from our records:	er the name and business addre	
<u>Title</u>	<u>Name</u>	Address	Type of Action
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			☐ Add ☐ Remove
	<del></del>		
g	d gartnership or limited l	iability limited partnership is	

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

P.O. BOX 496055  PORT CHARLOTTE, FLORIDA  33949  Effective date, if other than the date of filing:  (Effective date cannot be prior to not more than 30 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 520, F.S., requires all general partners to sign when adding or removing a "limited liability limited partnership" election statement.)	PORT CHARLOTTE, FLORIDA  33949  Effective date, if other than the date of filing:  (Effective date cannot be prior to nor more than 20 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			
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	Signature(s) of all new or dissociating general partner(s), if any:	(*NOTE: Only one current general partnermoving a "limited liability limited partn	er is required to sign the	is document unless the limited partnership is adding or ont. Chapter 620, F.S., requires all general partners to sig