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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Gulfport South 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:

Diane Minnix

Contact Person

PDR CPA's + Advisors

Firm/Company

4023 Tampa Road, Suite 2000

Address

Oldsmar, FL 34677

City, State and Zip Code

dminnix@pdr-cpa.com

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

For further information concerning this matter, please call:

Diane Minnix

Name of Contact Person

at (727) 785-4447

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

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



KINGSPRY

February 25, 2020

VIA CERTIFIED MAIL

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

JEROME B. FRANK
DONALD F. SPRY II
KIRBY G. UPRIGHT, LLM, CPA
KENT H. HERMAN
TERENCE L. FAUL
JOHN E. FREUND, III
NICHOLAS NOEL, III
GLENN M. HAZELTINE*
ALAN S. BATTISTI
KEVIN C. REID*
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BRIAN J. TAYLOR*
MICHAEL A. GAUL
ELLEN C. SCHURDAK
KRISTINE RODDICK
REBECCA A. YOUNG
DOROTA GASIENICA-KOZAK
JESSICA F. MOYER
SCOTT J. GAUGLER
MATTHEW T. TRANTER*
AVERY E. SMITH*
KEELY J. COLLINS
KARLEY BIGGS SEBIA*
JONATHAN M. HUERTA
RYAN K. FIELDS*

OF COUNSEL:
E. DRUMMOND KING
DOMENIC P. SBRONCHI
JAMES J. RAVELLE, PH.D., JD.
KATHLEEN CONN, PH.D., LLM

AFFILIATED WITH:
WEISS BURKARDT KRAMER, LLC
PITTSBURGH, PA 15219

*LICENSED IN PA AND NJ
**LICENSED IN PA AND NY

Re: Gulfport South Limited Partnership
Estate of John W. Wallace, Deceased
DOD: 08/10/2018
Our File No. 11025

Dear Sir or Madam:

This firm represents Shirley A. Wallace, the Executrix of the Estate of John W. Wallace, Deceased. Enclosed is an original death certificate and a short certificate evidencing the authority of Shirley A. Wallace to act as Executrix of the Estate. Also enclosed is an Authorization to Release Decedent Information, which has been signed by the Personal Representative.

John W. Wallace passed away on August 10, 2018. Ms. Wallace, in her capacity as General Partner of Gulfport South Limited Partnership, as well as Executrix of the Estate of John W. Wallace, Deceased, seeks to remove John W. Wallace as General Partner of Gulfport South Limited Partnership. Enclosed please find the applicable Cover Letter and Certificate of Amendment to Certificate of Limited Partnership in this regard. Also enclosed is a check, payable to "Florida Dept. of State", in the amount of \$113.75, representing the fee for filing and issuance of a Certified Copy and Certificate of Status.

Please process the enclosed documents as soon as possible.

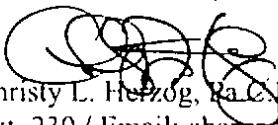
Should you require any additional information or documentation, please do not hesitate to contact

U.S.

Thank you very much.

Very truly yours,

KING, SPRY, HERMAN,
FREUND & FAUL, LLC


Christy L. Herzog, Ra, C.P. | Paralegal
Ext. 230 / Email: cherzog@kingspry.com

/clh

Enclosures

c: Shirley A. Wallace

Diane Minnix, PDR CPA's + Advisors

KING, SPRY, HERMAN, FREUND & FAUL, LLC • ATTORNEYS & COUNSELORS AT LAW
ONE WEST BROAD STREET • SUITE 700 • BETHLEHEM, PA 18018 • TEL: 610-332-0390 • FAX: 610-332-0314

ALLEN TOWN ♫ BETHLEHEM ♫ STROUDSBURG

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

Gulfport South 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

November 19, 1999, assigned Florida document number A99000001926
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

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>
General Partner	John W. Wallace, Trustee	4101 Kirkland Village Circle Bethlehem, PA 18017	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove Note: Deceased on 08/10/2018 <input type="checkbox"/> Add (see enclosed <input type="checkbox"/> Remove death certificate)
			<input type="checkbox"/> Add <input 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.)

AUTHORIZATION TO RELEASE INFORMATION

Re: Estate of John W. Wallace, Deceased
Loc of: 4101 Kirkland Village Circle, Bethlehem, PA 18017
Date of Death: 08/10/2018 SS#: ***-**-5177

I am the Executrix of the Estate of John W. Wallace, Deceased. I have retained the law firm of King, Spry, Herman, Freund & Faul, LLC, to represent and advise me in the administration of the above estate, and I am appointing my attorneys as my agent to collect information about the assets and liabilities of the decedent. **This authorizes you to** accept any requests, whether oral or written, from my attorneys to disclose and provide all requested information to my attorneys, including to close and/or liquidate bank accounts (including, but not limited to checking, money market, savings and/or certificates of deposit) and/or investment accounts by issuing a check payable to the *Estate of John W. Wallace, Deceased* and mailing said check to my attorneys. **You are authorized to** accept the request from my attorneys to terminate services and request a final invoice. **You are authorized to** release all financial information to my attorneys, King, Spry, Herman, Freund & Faul, LLC, pertaining to the Decedent, John W. Wallace, and on behalf of the Estate of John W. Wallace, Deceased.

Further, this will serve as my consent and authorization to speak to my attorneys and provide written documentation (including payoff information/statements) to my attorneys regarding **any assets including, but not limited to**, bank accounts, securities and/or investment accounts, individual retirement accounts, pension plans, 401K plans, annuities, insurance policies, medical insurance, income tax returns and tax related documentation including, but not limited to end of year documentation (i.e., 1099s, etc.); **and liabilities including, but not limited to**, loans, mortgages, credit card accounts, unpaid medical bills, hospital bills, utility bills, insurance premiums (and disclosure of all payment information, claims and appeals, billing/enrollment and specific claims) for medical, automobile or homeowner's insurance or any other type of insurance not listed, etc., in the name of the Decedent, John W. Wallace, now and at any time during the course of the administration of the Estate of John W. Wallace, Deceased.

FURTHER, this authorizes the change of address on all of the above referenced assets and/or liabilities to my attorney's office: c/o Christy L. Herzog, Paralegal, King, Spry, Herman, Freund & Faul, LLC, One West Broad Street, Suite 700, Bethlehem, PA 18018.

Attorney information is listed below:

Kirby G. Upright, Esquire, email: kupright@kingspry.com

King, Spry, Herman, Freund & Faul, LLC

Paul S. Frank, Esquire, email: pfrank@kingspry.com

One West Broad Street, Suite 700

Ellen C. Schurdak, Esquire, email: ecs@kingspry.com

Bethlehem, Pennsylvania 18018

Ryan K. Fields, Esquire, email: rfields@kingspry.com

(610) - 332-0390 / (610) 332-0314 (fax)

Kelly J. Decker, Paralegal, email: kdecker@kingspry.com

Christy L. Herzog, Paralegal, email: cherzog@kingspry.com

Jillian Sheckler, Paralegal, email: jsheckler@kingspry.com

Patricia A. Yetter, Paralegal, email: patti@kingspry.com

Suzanne Potoczak, Admin. Assistant, email: spotoczak@kingspry.com

YOU ARE AUTHORIZED TO ACCEPT A COPY OF THIS REQUEST FOR RELEASE OF INFORMATION IN LIEU OF THE ORIGINAL.

Commonwealth of Pennsylvania

: SS

County of Northampton

Sworn and subscribed to by

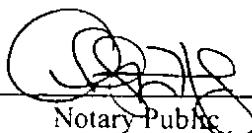
Shirley A. Wallace before

me this 19th day

of March, 2019.

Shirley A. Wallace

Shirley A. Wallace, Executrix of the Estate of John W. Wallace, Deceased (aka Shirley M. Wallace, Executrix of the Estate of John W. Wallace, Deceased)


Notary Public

Christy L. Herzog

Commonwealth of Pennsylvania - Notary Seal
Christy L. Herzog, Notary Public
Northampton County
My Commission Expires April 21, 2022
Commission Number 1255444

F. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

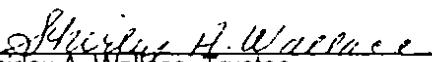
Effective date, if other than the date of filing: _____

(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.

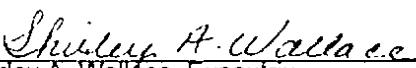
Signature(s) of a general partner or all general partners*:

(*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.)



Shirley A. Wallace, Trustee
Wallace Family Trust u/a/d 04/20/1999

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



Shirley A. Wallace, Executrix
Estate of John W. Wallace, Deceased

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