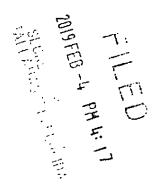
B07000000279

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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COVER LETTER

TO: Registration Division of C			
	mily Limited Partnership I	TIP	
SUBJECT:	may connect a anciomp	212121	
1	dame of Foreign Limited P	artnership or Limited Liabil	ity Limited Partnership
The enclosed amend	ment and fee(s) are su	bmitted for filing.	
	(-)	5,	
Please return all corr	espondence concernin	g this matter to:	
Gary M. Sams			
	Contact Person		
	Firm/Company		
P.O. Box 190007			
Atlanta, GA 31119	Address		
(City, State and Zip Code	-	
gsams@comcast.net			
E-mail address: (to	be used for future annual r	report notification)	
For further informati	on concerning this ma	tter, please call:	
Gary Sams	C	404 839-0	0093
		at ()	
Name of Cor	itact Person	Area Code Da	ytime Telephone Number
Enclosed is a check f	or the following amou	int:	
\$52.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fee and Certified Copy	S113.75 Filing Fee. Certified Copy, and Certificate of Status
STREET ADDRES	S:	MAILING A	DDRFSS.
Registration Section		Registration S	··
Division of Corporations		Division of Corporations	
Clifton Building		P. O. Box 6327	
2661 Executive Center Circle		Tallahassee, f	
Tallahassee, FL 323	01		

AMENDMENT TO CERTIFICATE OF AUTHORITY **FOR**

FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

AMENDMENT T	TO CERTIFICATE OF AUTHORITY FOR LIMITED BARTNERSHIP OF
	LIMITED PARTNERSHIP OR BILITY LIMITED PARTNERSHIP
1. The name of the limited partnership or li the Florida Department of State is: Same! Family Limited Partnership, LLLP	mited liability limited partnership as it appears on the records of
2. Document Number of Foreign Limited Page 1	artnership or Limited Liability Limited Partnership: <u>B07000000279</u>
2. The jurisdiction of its formation is: Delaw	care
3. The date the entity was authorized to train	nsact business in Florida is: 2(X)7
If the amendment changes the name of the new name:	ne limited partnership or limited liability limited partnership, enter
Acceptable Limited Liability Limited Partne LLLP.	imited Partnership, Limited, L.P., LP, or Ltd. ership suffixes: Limited Liability Limited Partnership, L.L.L.P. or ertner(s), list the name and business address of each general partner:
Name:	Business Address:
Betty P. Sams	2013 Crooked Lakes Estate. Add
	Eustis, F1, 32726
	Add
	☐Remove ☐Change
	Add
	☐Remove ————————————————————————————————————
	Add
	☐ Remove ☐ Change
	Add
	Remove ————————————————————————————————————
	Add

6. If the amendment changes the jurisdiction of organization, indicate no	ew jurisdiction:
7. If the amendment corrects any false statement listed in the application corrected and the correction:	n, indicate the statement being
8. If the amendment is to add or delete an election to be a limited liabilit the appropriate box:	y limited partnership statement, check
The entity elects to be a limited liability limited partner	ship.
The entity is no longer a limited liability limited partner	rship.
9. Attached is an original certificate, no more than 90 days olds, evidence amendment(s), duly authenticated by the official having custody of record which this entity is organized.	cing the aforementioned did in the jurisdiction under the law of
10. Effective date, if other than the date of filing:	filing requirements, this date will not
Signature of a general partner: On M. Causs Typed or printed name: Gary M. Sams	
Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	