

B15 000 000 099

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

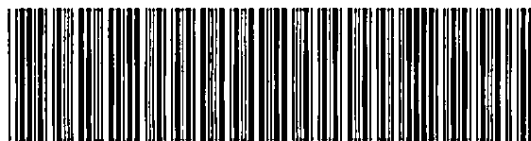
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Certificate of Good Standing

Office Use Only



800385963858

04/29/22--01011--018 **52.50

FILED
2022 JUL -5 AM 7:33
SECRETARY OF STATE
TALLAHASSEE, FL

A. BUTLER
JUL 19 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ACK ENTERPRISES LIMITED

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:

KAREN WARD JONES

Contact Person

EASTERN SHORE HOSPITALITY LP

Firm/Company

25558 FRIENDSHIP RD STE C

Address

DAPHNE

City, State and Zip Code

KARENWARD924@GMAIL.COM

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

For further information concerning this matter, please call:

KAREN WARD JONES

Name of Contact Person

at (251) 5258534

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

CERTIFICATE OF AMENDMENT
TO
CERTIFICATE OF LIMITED PARTNERSHIP
OF

FILED

2022 JUL -5 AM 7:33

SECRETARY OF STATE
TALLAHASSEE, FL

ACK ENTERPRISES LIMITED

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 APRIL 1 2015, assigned Florida document number B15000000098, 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:

EASTERN SHORE HOSPITALITY LP

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)

SAME AS BEFORE

New Mailing Address:

(May be post office box)

SAME AS BEFORE

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:

SAME AS BEFORE

New Registered Office Address:

SAME AS BEFORE

Enter Florida street address

SAME

City

, Florida

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>
_____	_____	_____	<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

_____	_____	_____	<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.)*

NAME CHANGE ONLY

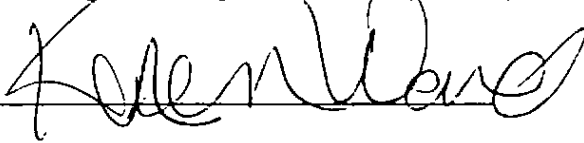
Effective date, if other than the date of filing: _____

(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.)



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

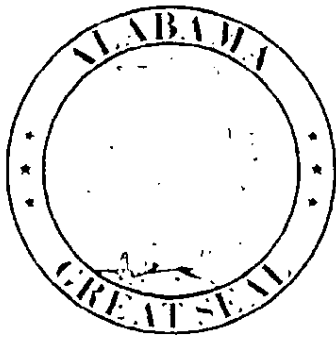
John H. Merrill
Secretary of State

P.O. Box 5616
Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that EASTERN SHORE HOSPITALITY LP was formed in Baldwin County, Alabama on March 4, 2015. The Alabama Entity Identification number for this entity is 000-330212. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



20220627000012244

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

06/27/2022

Date

John H. Merrill

Secretary of State



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

2022 JUL -5 PM 12:39

SECRETARY OF STATE
TALLAHASSEE, FL

June 21, 2022

KAREN WARD JONES
25558 FRIENDSHIP RD
STE C
DAPHNE, AL 33470

SUBJECT: ACK ENTERPRISES LIMITED
Ref. Number: B15000000098

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

YOU NEED TO SUBMIT A CERTIFICATE OF GOOD STANDING FROM YOUR STATE.

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: 022A00013970