

B20000000 112

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

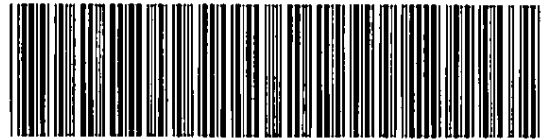
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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05/28/22--01010--015 **81.25

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2022 MAY 26 PM 5:30
RECEIVED
TALLAHASSEE, FLORIDA

JUL 29 2022

S. PRATHER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Frazer Ltd
Name of Foreign Limited Partnership or Limited Liability Limited Partnership

The enclosed amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Joelle Mueller
Contact Person

Frazer Ltd
Firm/Company

7219 Rampart Street
Address

Houston TX 77081
City, State and Zip Code

jmuellere@frazerbilt.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joelle Mueller at (713) 772-5511
Name of Contact Person Area Code 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

FILED

2022 MAY 26 PM 5:30

CLERK OF COURT
TALLAHASSEE, FLORIDA

AMENDMENT TO CERTIFICATE OF AUTHORITY
FOR
FOREIGN LIMITED PARTNERSHIP OR
LIMITED LIABILITY LIMITED PARTNERSHIP

1. The name of the limited partnership or limited liability limited partnership as it appears on the record of the Florida Department of State is:

Frazer Ltd.

2. Document Number of Foreign Limited Partnership or Limited Liability Limited Partnership:

B20000000112

3. The jurisdiction of its formation is: Texas

4. The date the entity was authorized to transact business in Florida is: 5/28/2020

5. If the amendment changes the name of the limited partnership or limited liability limited partnership, enter the new name:

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.

(If name unavailable in Florida, enter alternate name adopted for the purpose of transacting business in Florida.)

6. If the amendment changes the general partner(s), list the name and business address of each general partner:

Name:

Business Address:

Laura Griffin

7219 Rampart St

☒ Add

(Formerly Laura Griffin Richardson)

Houston TX 77081

☐ Remove

☐ Change

Janice Frazer Griffin

7219 Rampart St

☒ Add

Houston TX 77081

☐ Remove

☐ Change

☐ Add

☐ Remove

☐ Change

☐ Add

☐ Remove

☐ Change

☐ Add

☐ Remove

☐ Change

☐ Add

☐ Remove

☐ Change

6. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

7. If the amendment corrects any false statement listed in the application, indicate the statement being corrected and the correction:

8. If the amendment is to add or delete an election to be a limited liability limited partnership statement, check the appropriate box:

☐ The entity elects to be a limited liability limited partnership.

☐ The entity is no longer a limited liability limited partnership.

9. Attached is an original certificate, no more than 90 days olds, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

10. Effective date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.)

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 of a general partner:

 _____

Typed or printed name:

Laura Griffin

Filing Fee: \$52.50

Certified Copy (optional): \$52.50

Certificate of Status (optional): \$8.75

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

2022 MAY 26 PM 5:30

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