B99000000401

(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



000206939090

08/01/11--01018--011 **27.50

05/03/11--01015--007 **25.00

FILED

2011 JUL 29 AM 8: 01

SECRETARY OF STATE
TAIL AHASSEF ES CONTO

J. SAULSBERRY EXAMINER

AUG 2 2011

COVER LETTER

TO:	Registration Division of C					
SUBJE	·CT·	D&Y FAMILY LI	MITED PARTNERS	SHIP		
SOBJE			ited Liability Company			
The end	closed Articles o	of Amendment and fee(s) are su	bmitted for filing.			
Please	return all corres	pondence concerning this matte	r to the following:			
			LOGAN DEVRIES		_	
			Name of Person			
			NAI HALFORD			
			Firm/Company		-	
		1	P.O. DRAWER 12684			
			Address		2011 SE(ALL	
		P	ENSACOLA, FL 3259	1	ZOII JUL 29 SECRETARY ALLAHASSE	
		 	City/State and Zip Code		. 29 AR)	-
			EPER@NAIHALFOR		E.F.	7
For fur	ther information		E-mail address: (to be used for future annual report notification) oncerning this matter, please call:			
	10	GAN DEVRIES	at (_850_)_	433-0577	8: 01 STÂTE ORIDA	
		e of Person	Area Code &	Daytime Telephone Numb	er	
Enclose	ed is a check for	the following amount:				
\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is en	Certific nclosed) Certific	iling Fee, cate of Status & ed Copy onal copy is enclosed)	
	Regis Divis	LING ADDRESS: stration Section sion of Corporations Box 6327	Registration	Corporations		

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

Doy Family 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, assigned Florida document number, adopts the following certificate of amendment to its certificate of limited partnership.
This amendment is submitted to amend the following:
A. If amending name, <u>enter the new name of the limited partnership or limited liability limited partnership here</u> :
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) NAT Halford AND Tarragence St. 22 To Pensacola Fol 32502 To Tri
New Mailing Address: (May be post office box) NAT Halford PO Drawer 12624 Pensacola, FL. 3269
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: CLEM DARKENWALD
New Registered Office Address: Mew Registered Office Address: Enter Florida street address
Pensacda, Florida 32502 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 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:

Title	<u>Name</u>	Address	Type of Action	
·	Gilbert Darkenual	d 7535 N.E. River 1 Elk River, MN 553	Add O Litemove	
	Clem Tarkenwald	7535 NE River Rd Elk River, MN 55	Add AS 330 Remove S	
•			SECRETARY OF Add Remover.	
***************************************			Add Remove	•
***************************************			_ Add _ Remove	
·			Add Remove	
E. If the limited partinership	artnership or limited liability " status, enter change here:	limited partnership is amend	ding its "limited liability	
This Limited	Partnership hereby elects to be a	a "Limited Liability Limited Pa	rtnership."	
This Limited 1	Partnership hereby removes its	"Limited Liability Limited Part	tnership" status.	

Page 2 of 3

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

			
	·····		
	····		
ffective date, if other than the iffective date cannot be prior to not ate.)	: date of filing: · more than 90 days after i	the date this document is filed	by the Florida Department of
gnature(s) of a general part	tner or all general na	artnore*•	
NOTE: Only one current general proving a "limited liability limited len adding or removing a "limited l	partnership" election state	ment. Chapter 620, F.S., requ	ed partnership is adding or ires all general partners to sign
			
	<u>.</u>		
		·	
			Ž.
	ociating general par	tner(s), if any:	LLZ SEC SOII
gnature(s) of all new or diss			
gnature(s) of all new or diss			JUL 2 RETAR WASS
gnature(s) of all new or diss	<u> </u>		JUL 29 /
gnature(s) of all new or diss	·		JUL 29 AM 8 RETARY OF STA
gnature(s) of all new or diss	· · · · · · · · · · · · · · · · · · ·		JUL 29 AM 8: 01 RETARY OF STATE WHASSEE, FLORIDA
gnature(s) of all new or diss			JUL 29 AM 8: 01 RETARY OF STATE WHASSEE, FLORIDA