M16000000792

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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AUG 24 2016

S. YOUNG

COSTELLO & WICKER, P.A.

ATTORNEYS AT LAW
A LIMITED LIABILITY PARTNERSHIP OF PROFESSIONAL ASSOCIATIONS
Voice (239) 939-2222 • Facsimile (239) 939-2280

John M. Wicker, P.A., Managing Attorney
Also member of Florida Institute of Certified Public Accountants
Stephen N McGuire II, Esq.
Truman J. Costello, 1949-2011
In Memoriam

Brittany Professional Centre
12670 New Brittany Blvd., Suite 101
Fort Myers, FL 33907

Mailing Address
Post Office Drawer 60205
Fort Myers, FL 33906-6205

August 3, 2016

Florida Department of State
Division of Corporations - Corporate Filing
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Re: Simultaneous Name Change

Document Number M16000000792 – STONERIDGE PARTNERS OF KENTUCKY, LLC n/k/a STONERIDGE PARTNERS, LLC.

Document Number H77334 – STONERIDGE PARTNERS, INC. n/k/a TELESIS PARTNERS, INC.

Dear Sir/Madam:

In connection with the above captioned simultaneous name change, enclosed please find the following:

1. Articles of Amendment to Articles of Organization for STONERIDGE PARTNERS OF KENTUCKY, LLC, document number M16000000792, dated 01/26/2016 (please process first);
2. Articles of Amendment to Articles of Incorporation of STONERIDGE PARTNERS, INC. document number H77334, dated 09/23/1985 (please process second); and
3. John M. Wicker, P.A., Operating Account check #6779 in the amount of $50.00, payable to Florida Department of State, representing payment for filing of the two amendments.

Should you have any questions concerning this simultaneous name change, please do not hesitate to contact our office at 239-939-2222. Thank you for your assistance.

Very truly yours,

John M. Wicker
For the Firm

Direct Dial: *(239) 690-4265*
E-mail: *jwicker@lawcrw.com*

JMW/mmw
Enclosures: As stated above

FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 10, 2016

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TALLAHASSEE, FLORIDA

COSTELLO & WICKER, PA
PO BOX 60205
FORT MYERS, FL 33906

SUBJECT: STONERIDGE PARTNERS OF KENTUCKY, LLC
Ref. Number: M16000000792

We have received your document for STONERIDGE PARTNERS OF KENTUCKY, LLC and your check(s) totaling $50.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6051.

Shelia H Young
Regulatory Specialist II

Letter Number: 516A00016894

COSTELLO & WICKER, P.A.
ATTORNEYS AT LAW
Voice (239) 939-2222 • Facsimile (239) 939-2280

John M. Wicker, P.A., Managing Attorney
Also member of Florida Institute of Certified Public Accountants

Stephen N. McGuire, II

Truman J. Costello, 1949-2011

Brittany Professional Centre
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Fort Myers, FL 33907

Mailing Address
Post Office Drawer 60205
Fort Myers, FL 33906-6205

August 24, 2016

Shelia Young
Regulatory Specialist II
Florida Department of State

Sent By:
Facsimile Transmission to: 850-245-6030
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Re: STONERIDGE PARTNERS OF KENTUCKY, LLC
M16000000792
NAME: CHANGE TO STONERIDGE PARTNERS, LLC

Dear Shelia:

Further to our telephone conversation earlier, please take this as confirmation that we release the name of STONERIDGE PARTNERS, LLC to be available to be used by STONERIDGE PARTNERS OF KENTUCKY, LLC and therefore change the name from

OLD: STONERIDGE PARTNERS OF KENTUCKY, LLC TO NOW KNOWN AS

NEW: **STONERIDGE PARTNERS, LLC**

Thank you so much for all your kind and rapid assistance in this matter.

Very truly yours,

Michele Wicker, Assistant to John M. Wicker P.A., For the Firm

Direct Dial: *(239) 690-4269*
E-mail: *mwicker@lawcrw.com*

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16 AUG 24 PM 4:31
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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of State: STONERIDGE PARTNERS OF KENTUCKY, LLC

Enter new principal office address, if applicable: _____

(Principal office address MUST BE A STREET ADDRESS) _____

_____

Enter new mailing address, if applicable: _____

(Mailing address MAY BE A POST OFFICE BOX) _____

_____

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TALLAHASSEE, FLORIDA

2. The Florida document number of this limited liability company is: M16000000792

3. Jurisdiction of its organization: KENTUCKY

4. Date authorized to do business in Florida: 1/26/2016

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: STONERIDGE PARTNERS, LLC
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

_____

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer 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

_____, **Florida** _____
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 as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

_____
If Changing Registered Agent, Signature of New Registered Agent

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

_____

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

_____

Title/ Capacity	Name	Address	Type of Action
_____	_____	_____	☐ Add
		_____	☐ Remove
_____	_____	_____	☐ Add
		_____	☐ Remove
_____	_____	_____	☐ Add
		_____	☐ Remove
_____	_____	_____	☐ Add
		_____	☐ Remove
_____	_____	_____	☐ Add
		_____	☐ Remove

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9. Attached is a certificate, if required: no more than 90 days old, 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.

_____
Signature of the authorized representative

JOHN M. WICKER
_____
Typed or printed name of signee

Filing Fee: $25.00

Commonwealth of Kentucky
Alison Lundergan Grimes, Secretary of State

Alison Lundergan Grimes
Secretary of State
P. O. Box 718
Frankfort, KY 40602-0718
(502) 564-3490
http://www.sos.ky.gov

Certificate of Existence

Authentication number: 170586
Visit https://app.sos.ky.gov/ftshow/certvalidate.aspx to authenticate this certificate.

I, Alison Lundergan Grimes, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

Stoneridge Partners, LLC

is a limited liability company duly organized and existing under KRS Chapter 14A and KRS Chapter 275, whose date of organization is November 4, 2015 and whose period of duration is perpetual.

I further certify that all fees and penalties owed to the Secretary of State have been paid; that articles of dissolution have not been filed; and that the most recent annual report required by KRS 14A.6-010 has been delivered to the Secretary of State.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal at Frankfort, Kentucky, this 30th day of November, 2015, in the 224th year of the Commonwealth.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 AUG -8 PM 3:52

Alison Lundergan Grimes
Secretary of State
Commonwealth of Kentucky
170586/0936214