I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under
oath; that I am a general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name
appears above, or on an attachment with all other like empowered.

OWNER

DOCUMENT# A0200000536

Entity Name: THE MICHAEL L. JENKINS FAMILY LIMITED PARTNERSHIP

Current Principal Place of Business:

75 BAY GROVE BOULEVARD SUITE 1 FREEPORT, FL 32439

Current Mailing Address:

75 BAY GROVE BOULEVARD SUITE 1 FREEPORT, FL 32439

FEI Number: 04-3732883

Name and Address of Current Registered Agent:

JENKINS, MICHAEL L 75 BAY GROVE BOULEVARD SUITE 1 FREEPORT, FL 32489 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

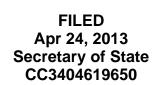
Electronic Signature of Registered Agent

General Partner Detail :

Document #		Document #	
Name	JENKINS, MICHAEL L	Name	JENKINS, LAURA DIANE
Address	75 BAY GROVE BOULEVARD	Address	75 BAY GROVE BOULEVARD
City-State-Zip:	FREEPORT FL 32439	City-State-Zip:	FREEPORT FL 32439

Electronic Signature of Signing General Partner Detail

SIGNATURE: MICHAEL L JENKINS



Certificate of Status Desired: No

04/24/2013 Date

Date