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(Requestor's Name)
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(City/State/Zip/Phone #)
. PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Emily Hame)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
<u> </u>

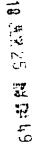
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COVER LETTER

TO: Registration Division of C				
SUBJECT: Elfers RI	RH, Ltd.			
Na Na	me of Florida Limited Pa	rtnership or Limited Liab	ility Limited Partnership	
The enclosed Certifi	cate of Amendment a	nd fee(s) are submitt	ed for filing.	
Please return all corn	espondence concerni	ng this matter to:		
Gail W. Curtis				
	Contact Person			
Elfers RRH, LLC				
	Firm/Company			
11635 NW 1st Ave				
	Address	,		
Gainesville, FL 32607				
(City, State and Zip Code			
gailcurtis@jotar.com				
E-mail address: (to	be used for future annual	report notification)		
For further informati	ion concerning this m	atter, please call:		
Gail W. Curtis		at (352) 33	32-0838	
Name of Conta	ct Person		Paytime Telephone Number	
Enclosed is a check	for the following amo	ount:		
☐ \$52.50 Filing Fee	□\$61.25 Filing Fee and Certificate of Status	□\$105.00 Filing Fee and Certified Copy	E S113.75 Filing Fee, Certified Copy, and Certificate of Status	
STREET ADDRESS:			G ADDRESS:	
Registration Section		Registration Section		
Division of Corporations Clifton Building		Division o P. O. Box	of Corporations	
2661 Executive Center Circle			Tallahassee, FL 32314	
Tallahassee, FL 323	01			

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

Elfers RRH, Ltd.			
Insert name curr	ently on file with Flor	ida Department of State	
Pursuant to the provisions of section 620 limited liability limited partnership, who 08/30/1977 assi adopts the following certificate of amend	se certificate was t gned Florida docu	iled with the Florida ment number <u>A0595</u>	a Department of State on
This amendment is submitted to amend the fo	ollowing:		
A. If amending name, enter the new nam here:	e of the limited pai	rtnership or limited l	iability limited partnership
New name must be	distinguishable and co	ntain an acceptable suff	ix.
Acceptable Limited Partnership suffixes: Limited Acceptable Limited Liability Limited Partnership			ip, L.L.L.P. or LLLP.
B. If amending mailing address and/o principal office address here:	r principal office	address, enter new	mailing address and/or
New Principal Office Add			
(Must be STREET address)		V 1st Ave le, FL 32607	
New Mailing Address: (May be post office box)		V 1st Ave	77
		le, FL 32607	
C. If amending the registered agent and/ new registered agent and/or the new regist			ords, enter the name of the
Name of New Registered Agent:	Gail W. Curtis		
New Registered Office Address:	11635 NW 1st Av	e Inter Florida street ad	dress
	Gainesville		da 32607
	City	, Floric	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:

Title	<u>Name</u>	Address	Type of Action
	Elfers RRH, LLC	11635 NW 1st Ave Gainesville, FL 32607	_
	Orangewood Lakes, LLC	185 Lincoln St. Suite 200 Hingham, MA 02043	_ □ Add □ Remove
			_
			_
			_
			_ □ Add □ 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 her	eby 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) he	ere: (Attach additiona	l sheets, if no	ecessary.	.)
Effective date, if other than the date of filing: (Effective date cannot be prior to nor more than 90 days after the date to	dia dominantia Glad bo	thu Florida F		
State.)				н ој
Note: If the date inserted in this block does not meet the applicable state be listed as the document's effective date on the Department of State's i		, this date wil	ll not	
Signature(s) of a general partner or all general partners	<u>*:</u>			
(*NOTE: Only one current general partner is required to sign this document removing a "limited liability limited partnership" election statement. C				
when adding or removing a "limited liability limited partnership" election		6 t		
Elfers RRH, LLC				
Cliefs ANTI, LLC				
By Tail I will		.3	⇔	
Its Manager			િવ ,π⊒	- 1
			٠	1
		·····	***	•
Signature(s) of all new or dissociating general partner(s)	, if any:	, 	3 Sant	
		. !	64	
Elfers RRH, LLC		P.		
By Tail (Inter				
Its Manager				
		.	•	
Filing Fee: \$52.50				
Certified Copy (optional): \$52.50				
Certificate of Status (optional): \$8.75				