

A98000001542

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

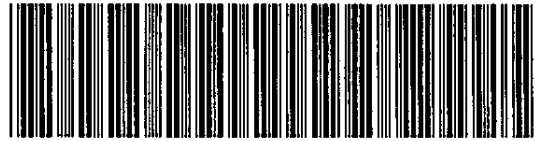
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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FILED
18 FEB 13 AM 11:40
FEB 13 2018
11:40 AM
FEB 13 2018



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 23, 2018

HOWARD JACOBSON
WR MEZZ GP LLC
C/O 255 EAST BROWN ST, SUITE 310
BIRMINGHAM, MI 48009

SUBJECT: CED ARBOR POINTE II, LTD.
Ref. Number: A98000001542

RECEIVED
DEPARTMENT OF STATE
18 FEB 13 AM 4: 11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for CED ARBOR POINTE II, LTD. and your check(s) totaling \$61.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability limited partnership must have an active registration/filing on file with this office before this filing can be completed. We are enclosing the appropriate instructions and/or forms 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.

Stacey M Warren
Regulatory Specialist:II

Letter Number: 218A00001402

Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301
850.656.7956
Fax: 850.656.7953
www.Incserve.com
e-mail: info@incserv.com



ORDER FORM

TO: Florida Department of State
Division of Corporations, Clifton
Building
2661 Executive Center Circle
Tallahassee, FL 32301
corpshelp@dos.myflorida.com
850-245-6051

FROM: Melissa Stops
mstops@incserv.com
850.656.7953

REQUEST DATE: 2/13/2018

PRIORITY: Expedite

OUR REF # (Order ID#): 627670

ORDER ENTITY:
CED ARBOR POINTE II, LTD.

PLEASE PERFORM THE FOLLOWING SERVICES:

CED ARBOR POINTE II, LTD. (FL)

File the attached amendment

NOTES:

Email address for annual report reminders: howard@jacobsonbrothers.com

please put in our bin for pick-ups thanks!!

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CED Arbor Pointe II, Ltd.
Name of Florida Limited Partnership or Limited Liability Limited Partnership

The enclosed Certificate of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Howard Jacobson

Contact Person

WR Mezz GP LLC

Firm/Company

c/o 255 East Brown Street, Suite 310

Address

Birmingham MI 48009

City, State and Zip Code

howard@jacobsonbrothers.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Seymour N. Dubrinsky

at (248) 258 6600

Name of Contact Person

Area Code and 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

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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.

Melissa Styo

 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:

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
GP	WR Mezz GP LLC	c/o 255 East Brown Street Suite 310 Birmingham MI 48009	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
GP	CED Capital Holdings IV B, Lp	2606 Maitland Center Parkway Suite A Maitland FL 32751	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove

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E. If the limited partnership or limited liability limited partnership is amending its "limited liability limited partnership" status, enter change here:

- This Limited Partnership hereby 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) here: *(Attach additional sheets, if necessary.)*

Effective date, if other than the date of filing: _____

(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

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(s) of a general partner or all general partners*:

(*NOTE: Only one current general partner is required to sign this document unless the limited partnership is adding or removing a "limited liability limited partnership" election statement. Chapter 620, F.S., requires all general partners to sign when adding or removing a "limited liability limited partnership" election statement.)

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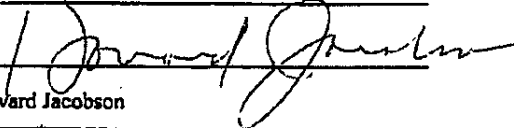
Signature(s) of all new or dissociating general partner(s), if any:

(New GP) WR Mezz GP LLC, a Delaware

(Dissociating GP) CED Capital Holdings IV B, Ltd.

limited liability company, General Partner

a Florida limited partnership

By: 
Howard Jacobson

By: 
Brian Spear

Filing Fee: \$52.50
Certified Copy (optional): \$52.50
Certificate of Status (optional): \$8.75