

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H06000068051 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)205-0380

From:

Account Name

: C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone

(850) 222-1092

Fax Number

: (850) 878-5926

REGISTERED AGENT

AMLI RESIDENTIAL PROPERTIES, L.P.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

~ ~ ~ ~	REGISTERED AG	ent, or both
partnership or limit		orida Statutes, the undersigned limited submits the following statement in order to both, in the state of Florids.
	idential Properties	
N	une of Limited Partnership or Limi	ted Liability Limited Parmership
2.03/23/04		3. B04000000124
Date of filing	registration in Florida	Florida document number
4. The name of the re Department of State:	egistered agent and the registered o	ffice address as shown on the records of the F
•	CORPORATION S	ERVICE COMPANY
	Nexts	
	1201 HAYS STRI	EET
•	Addre	85
	TALLAHASSEE F	FL 32301-2525
	City, State	and Zip
5. The name and Flor	ide street eddress of the new regist	tered agent and/or office:
	CT Corporation S	vstem
	Name	
	1200 South Pine	·
•	Florida street address (P.O	
	Plantation	FL_33324
	City, State a	nd Zip
6. Such change(s) is/s	re affective when filed by the Flor	ids Department of Stars.
See Att	ached	
Signature of General i	'er inor	
comply with the provis	pointment as registered agent and tions of all statutes relative to the p an accept the obligations of my po	agree to act in this capacity. I further agree to proper and complete performance of my duties osition as registered agent.
11/		Jennifer F. Aultman
Signature of Rogistics	diagoni	Assistant Secretary
Filing Fee:	\$35.00	
Certified Copy to		

70'CT 9007./bT/E

AMLI Residential Properties, L.P.

By: PPF AMLI Partners, LLC, its General Partner

By: PPF Multifamily, LLC, its Manager

By: PPF OP, LP, its Sole Member

By: PPF OPGP, LLC, its General Partner

By: Prime Property Fund, LLC, its Sole Member

By: Morgan Stanley Real Estate Advisor, Inc., its Manager

OS HAR IN IMIO: TO