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.

(((H210003818863)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : STEARNS WEAVER MILLER WEISSLER ALHADEFF & SITTERSON

Account Number : I20060000135 Phone : (305)789-3200

Fax Number : (305)789-4137

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

## LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION HIBISCUS GROVE, LP

Certificate of Status	0	
Certified Copy	0	
Page Count	04	
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**QCT** 1.5 2021

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October 14, 2021

## FLORIDA DEPARTMENT OF STATE Division of Corporations

HIBISCUS GROVE, LP 1580 SAWGRASS CORPORATE PKWY., STE. 100

FT. LAUDERDALE, FL 33323

SUBJECT: HIBISCUS GROVE, LP

REF: A20000000481

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document is illegible and not acceptable for imaging.

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.

Stacy Prather Regulatory Specialist III FAX Aud. #: E21000381886 Letter Number: 721A00025028

Please see attached.

## CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

202100	
C7/4	6
•	1 25

Hibiscus Grove, LP		<u></u>
Insert name currently on	file with Florida De	epartment of State
Pursuant to the provisions of section 620.1202, limited liability limited partnership, whose certi 10/22/2020, assigned F	ficate was filed orida document	with the Florida Department of State on number A20000000481
adopts the following certificate of amendment to	its certificate o	f limited partnership.
This amendment is submitted to amend the following	:	
A. If amending name, <u>enter the new name of the here</u> :	limited partners	thip or limited liability limited partnershi
New name must be distingui	shable and contain	an acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Partner Acceptable Limited Liability Limited Partnership suffixes	ship, Llmited, L.P., Limited Liability i	LP, or Ltd. Limited Partnership, L.L.L.P, or LLLP.
B. If amending mailing address and/or princ principal office address here:	ipal office addi	ress, enter new mailing address and/or
New Principal Office Address: (Must be STREET address)		
New Mailing Address: (May be post office box)		
C. If amending the registered agent and/or registe registered agent and/or the new registered office a	red office addres ddress here:	s on our records, <u>enter the name of the ne</u> v
Name of New Registered Agent:		
New Registered Office Address:	Р.	
	Enter I	Florida street address
<del></del> -	City	, Florida Zip Code
	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.

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	Name	Address	Type of Action
GP	EHDOC Hibiscus Grove Charitable Corporation	Suite 100 Fort Lauderdale, FL 33323	Z ☐ Add ☐ Remove
<u>GP</u>	Interurban - Hisbiscus Grove, LLC	150 SE 2nd Avenue, Suite 800 Miami, FL 33131	_ ☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			□ 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:

0	This Limited Partnership hereby elects to be a "Limited Liabilit	y Limited Partnership."
---	--	-------------------------

(NOTE: If adding or removing" limited liability limited partnership" status, all general partners must sign this amendment.)

This Limited Partnership hereby removes its "Limited Liability Limited Partnership" status.

· — - <del> </del>	
Effective date, if other than the date of filing: Effective date connot be prior to nor more than 90 don	is after the date this document is filed by the Florida Department of
Note: If the date inserted in this block does not meanth	A social ship statutons filling requirements (3.7. 1)
e listed as the document's effective date on the Depart	ment of State's records.
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