6/28/2017



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.

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Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (512)418-6949 Fax Number : (954)208-0845

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

Email	Address:	

LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION VDC - MATTHEW RIDGE, LTD.

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$105.00

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M. MILLIGAN

JUN 28 2017

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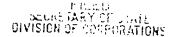
COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: VDC-Matthew Ridge, 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:
Kenaya Camacho
Contact Person
Alden Torch Financial
Firm/Company
1225 17th Street, STE 1400
Address
Denver, Colorado 80202
City, State and Zip Code
kenaya.camacho@aldentorch.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
at () Name of Contact Person Area Code and Daytime Telephone Number
Name of Contact Person Area Code and Daytime Telephone Number
Enclosed is a check for the following amount:
\$52.50 Filing Fee and Certificate of Status \$\$105.00 Filing Fee Certified Copy and Certificate of Status
STREET ADDRESS: MAILING ADDRESS:
Registration Section Registration Section
Division of Corporations Division of Corporations
Clifton Building P. O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314
Tallahassee, FL 32301

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF



	VDC-Ma	atthew Ridge, Ltd.	,
Insert name cur	rently on f	ile with Florida Depar	tment of State
Pursuant to the provisions of section 620 limited liability limited partnership, who September 18, 2001	ose certif		h the Florida Department of State on
adopts the following certificate of amen			
This amendment is submitted to amend the t	ollowing:		
A. If amending name, enter the new nan here:	ie of the	limited partnership	or limited liability limited partnership
New name must be	distinguis	shable and contain an a	acceptable suffix.
Acceptable Limited Partnership suffixes: Limite Acceptable Limited Liability Limited Partnershi			
B. If amending mailing address and/oprincipal office address here:	or princ	ipal office addres	s, enter new mailing address and/or
New Principal Office Add	lress:	1225 17th Street, S	TE 1400
(Must be STREET address)		Denver, Colorado 8	0202
New Mailing Address:		1225 17th Street, S'	
(May be post office box)		Denver, Colorado 8	
C. If amending the registered agent and new registered agent and/or the new regis			on our records, <u>enter the name of the</u>
Name of New Registered Agent:	CTO	Corporation Syster	n
New Registered Office Address:	1200		Road (Broward County)
		imei rui	
	<u>Plant</u>	ation City	, Florida <u>33324</u> Zip Code



New Registered Agent's Signature, if changing Registered Agent:

17 JUN 20 PM 6: 07

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.

<u>le</u>	<u>Name</u>	<u>Address</u>	Type of Action
<u> </u>	Alden GP-Texas, LLC	1225 17th Street, STE 1400 Denver, Colorado 80202	Xdd Remove
 -	VDC/GP-Matthew Ridge, LLLP	3030 Hartley Road, Suite 310 Jacksonville, FL 32257	Add ⊠ Remove
			Add
			Add
			Add Remove
			Add Remove

Page 2 of 3

(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 necess	iary.j
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 Depar State.)	tment of
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 additionable a "limited liability limited partnership" election statement. Chapter 620, F.S., requires all general partnership when adding or removing a "limited liability limited partnership" election statement.)	ng or rs to sig
Alden GP-Texas, LLC	
By: Mackinaw Holdings, LLC, its sole member By: Alden Affordable Holdings, LLC, its sole member	
By: City wade	
Name: Alison Wadle Title: Executive Vice President and Secretary	
Signature(s) of all new or dissociating general partner(s), if any:	
especial particular transfer and the second particular transfer	
VDC/GP-Matthew Ridge, LLLP	
By: VDC Matthew Ricige, M.C., its general partner	
By: Wash & Min	
Name: Chine & Muse	
Title Vie Peridina	
Filing Fee: \$52.50 Certified Copy (optional): \$52.50	ب

\$8.75

Certificate of Status (optional):