

AD2000001096

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

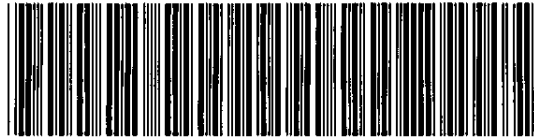
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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DIVISION OF CORPORATIONS

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NOV 14 2017

# CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312

850-656-4724

Date: 11/13/2017  
ACCT. I20160000072

*encl 12/11*

|             |                                      |
|-------------|--------------------------------------|
| Name:       | Toll Estero Limited Partnership (FL) |
| Document #: |                                      |
| Order #:    | 10713646 Line 5                      |

|                                   |                          |                         |  |
|-----------------------------------|--------------------------|-------------------------|--|
| Certified Copy of Arts & Amend:   | <input type="checkbox"/> |                         |  |
| Plain Copy:                       | <input type="checkbox"/> |                         |  |
| Certificate of Good Standing:     | <input type="checkbox"/> |                         |  |
| Apostille/Notarial Certification: | <input type="checkbox"/> | Country of Destination: |  |
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|         | COGS:      |

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| Availability _____  |
| Document _____      |
| Examiner _____      |
| Updater _____       |
| Verifier _____      |
| W.P. Verifier _____ |
| Ref# _____          |

Amount: \$ ~~77.50~~ 105.00

Thank you!

# CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312  
850-656-4724

Date: 11/13/2017

ACCT. I20160000072

*en: c SW*

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|-------------|--------------------------------------|
| Name:       | Toll Estero Limited Partnership (FL) |
| Document #: |                                      |
| Order #:    | 10713646 Line 5                      |

|                                      |                          |                         |  |
|--------------------------------------|--------------------------|-------------------------|--|
| Certified Copy of Arts<br>& Amend:   | <input type="checkbox"/> |                         |  |
| Plain Copy:                          | <input type="checkbox"/> |                         |  |
| Certificate of Good<br>Standing:     | <input type="checkbox"/> |                         |  |
| Apostille/Notarial<br>Certification: | <input type="checkbox"/> | Country of Destination: |  |
|                                      |                          | Number of Certs:        |  |

|         |            |
|---------|------------|
| Filing: | Certified: |
|         | Plain:     |
|         | COGS:      |

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|---------------------|
| Availability _____  |
| Document _____      |
| Examiner _____      |
| Updater _____       |
| Verifier _____      |
| W.P. Verifier _____ |
| Ref# _____          |

Amount: \$ 77.50



**CERTIFICATE OF AMENDMENT  
TO  
CERTIFICATE OF LIMITED PARTNERSHIP  
OF**

TOLL ESTERO LIMITED PARTNERSHIP

Insert name currently on file with Florida Department of State

Pursuant to the provisions of section 620.1202, Florida Statutes, this Florida limited partnership or limited liability limited partnership, whose certificate was filed with the Florida Department of State on August 12, 2002, assigned Florida document number A02000001096, adopts the following certificate of amendment to its certificate of limited partnership.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited partnership or limited liability limited partnership here:**

\_\_\_\_\_  
New name must be distinguishable and contain an acceptable suffix.

*Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.*

*Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.*

**B. If amending mailing address and/or principal office address, enter new mailing address and/or principal office address here:**

New Principal Office Address:

(Must be STREET address)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

New Mailing Address:

(May be post office box)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**C. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

\_\_\_\_\_

New Registered Office Address:

\_\_\_\_\_

*Enter Florida street address*

\_\_\_\_\_, Florida \_\_\_\_\_

*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:**

| <u>Title</u> | <u>Name</u>                        | <u>Address</u>                          | <u>Type of Action</u>  |
|--------------|------------------------------------|---|--|
| GP           | Toll FL GP Corp.                   | 250 Gibraltar Road<br>Horsham, PA 19044 | <input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove |
| GP           | Toll Southeast LP Company,<br>Inc. | 250 Gibraltar Road<br>Horsham, PA 19044 | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove |
|              |                                    |   | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |                                    |   | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |                                    |   | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |                                    |   | <input type="checkbox"/> Add<br><input type="checkbox"/> 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 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: November 22, 2017 at 12:01 AM

*(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.)

FILED  
17 NOV 3 AM 10:15  
CLERK OF COURT  
JUDICIAL CIRCUIT IN AND FOR  
THE NINTH JUDICIAL CIRCUIT  
MIAMI, FLORIDA

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



Kenneth J. Greenspan, VP of Toll FL GP Corp.



Kenneth J. Greenspan, VP of Toll Southeast LP  
Company, Inc.

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