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| (Re | questor's Name) | |
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| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Na | me) |
| (Do | cument Number) |) |
| Certified Copies | _ Certificate | s of Status |
| Special Instructions to | Filing Officer: | |
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SECRETARY OF STATE
SECRETARY OF STATE

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T. BROWN

COVER LETTER

| TO: Registration Section Division of Corporations |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| SUBJECT: Creative Choice Homes XXXIII, 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: |
| Shailesh Shah Contact Person |
| Firm/Company |
| 801 Northpoint Parkway, Suite 121 Address |
| West Palm Beach, Florida 33407 City, State and Zip Code |
| rollandssalloum@gmail.com E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Roland S. Salloum at (561) 275-1725 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 and Certified Copy Status \$105.00 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 |

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP

Creative Choice Homes XXXIII, Ltd. Insert name currently on file with Florida Department of State

| limited liability limited partnership, whose | 202, Florida Statutes, this Florida limited partnership or certificate was filed with the Florida Department of State on led Florida document number |
|-----------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|
| adopts the following certificate of amendment | nent to its certificate of limited partnership. |
| This amendment is submitted to amend the following | owing: |
| A. If amending name, <u>enter the new name of here</u> : | of the limited partnership or limited liability limited partnership |
| Villas | s at Spring Hill, Ltd. |
| New name must be dis | stinguishable and contain an acceptable suffix. |
| Acceptable Limited Partnership suffixes: Limited P Acceptable Limited Liability Limited Partnership st | artnership, Limited, L.P., LP, or Ltd. uffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP. |
| B. If amending mailing address and/or principal office address here: | principal office address, enter new mailing address and/or |
| New Principal Office Address (Must be STREET address) | Spring Hill, Florida 34609 |
| New Mailing Address: (May be post office box) | 14352 Pablo Boulevard Spring Hill, Florida 34609 |
| new registered agent and/or the new register | aw offices of |
| Name of New Registered Agent: | Rojas & Salloum, P.A. |
| New Registered Office Address: | 801 Northpoint Parkway, Suite 121 Enter Florida street address |
| | West Palm Beach Florida 33407 |
| | City Zip Code |

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

| comply with the p | he appointment as registered ag provisions of all statutes relative and accept the obligations of m | to the proper and complete | e performance of my duties, and I |
|-------------------|-----------------------------------------------------------------------------------------------------------|-----------------------------|---------------------------------------|
| | | If Changing Registered Agen | nt, Signature of New Registered Agent |
| | the general partner(s), enter the | e name and business addre | ess of each general partner being |
| Title | <u>Name</u> | Address | Type of Action |
| | <u> </u> | | Add Remove |
| | | | |
| | | | Add Remove |
| | | | Add Remove |
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| | ed partnership or limited liab ship" status, enter change her | | s amending its "limited liabilit |
| | ited Partnership hereby elects to | | nited Partnership." |
| | ited Partnership hereby remove | | |

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

| F. If amending any other infor | mation, e | enter change(s) | here: (Att | ach addition | nal sheets, if ne | cessary.) |
|---------------------------------------------------------------------------------------------------------------------|------------------------------|---------------------------------------|-----------------------------------------|------------------------------------------|----------------------------------------|------------------------------|
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| Effective date, if other than the date (Effective date cannot be prior to nor more State.) | e of filing e than 90 a | g:days after the da | te this docur | nent is filed l | y the Florida D | epartment of |
| Signature(s) of a general partner | or all ge | eneral partne | rs*: | | | |
| (*NOTE: Only one current general partneremoving a "limited liability limited partneremoving a "limited liability"). | ership" ele | ection statement. | Chapter 62 | 0, F.S., requi | ed partnership is res all general p | adding or artners to sign |
| | | | *************************************** | | | |
| - Cleum | | | | | | |
| | <u> </u> | | | • | | |
| | | | | | | |
| Signature(s) of all new or dissocia | ating ger | neral partnei | (s), if any | ;; | | |
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| Filing Fee: Certified Copy (optional): Certificate of Status (optional): | \$52.50 \$52.50 \$8.75 | | | | | |