A67000006728

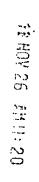
(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

TO: Registration Division of C				
		r Apartments Limit		
IN	ame of Florida Limited Pa	rtnership or Limited Liabilii	ly Limited Partnership	
The enclosed Certification	icate of Amendment a	and fee(s) are submitted	for filing.	
Please return all cor	respondence concerni	ng this matter to:		
	JAN HEFLINGER			
	Contact Person			
PICERNE DE	VELOPMENT COR	PORATION		
TOETHE BE	Firm/Company			
247 N	ORTH WESTMONT	E DB		
	Address			
	ONTE SPRINGS, FL	_ 32714		
	City, State and Zip Code			
	NGER@PICERNEF			
E-mail address: (to	be used for future annual	report notification)		
E Codbar C				
For further informat	ion concerning this m	atter, please call:		
JAN HI	EFLINGER	at (407)	772-0200 EXT 132	
Name of Conta	act Person	Area Code and Day	time Telephone Number:	:
Enclosed is a check	for the following amo	ount:	rume Telephone Number:	minimaa minimaa minima
\$52.50 Filing Fee	\$61.25 Filing Fee	\$105.00 Filing Fee	\$113.75 Filing Fee,	,
	and Certificate of	and Certified Copy	Certified Copy, and	* *
	Status		\$113.75 Filing Fee. Certified Copy, and Certificate of Status	2.44
STREET ADDRES	SS:	MAILING.	ADDRESS:	
Registration Section		Registration	Section	
Division of Corpora	tions		Corporations	
Clifton Building	4C! 1	P. O. Box 63		
2661 Executive Cen Tallahassee, FL 323		Tallahassee,	FL 32314	
Tananassee, FL 323	301			

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

LAKE POINT SENIOR APARTMENTS 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 03/04/2003 , assigned Florida document number A0300000328 , adopts the following certificate of amendment to its certificate of limited partnership. This amendment is submitted to amend the following:			on
			A. If amending name, <u>enter the new name of the limited partnership or limited liability limited partnership</u> nere:
New name must be distinguis	shable and contain a	n acceptable suffix.	_
Acceptable Limited Partnership suffixes: Limited Partners Acceptable Limited Liability Limited Partnership suffixes:			
B. If amending mailing address and/or princ principal office address here:	ipal office addr	ess, enter new mailing address and	<u> /or</u>
New Principal Office Address:		3 3	4
(Must be STREET address)			. 5643 1443
		4 ₁₃₁ 20	
New Mailing Address:			i j
(May be post office box)			
C. If amending the registered agent and/or regis new registered agent and/or the new registered offi		ess on our records, <u>enter the name of</u>	<u>f</u> the
Name of New Registered Agent:			
New Registered Office Address:	Enter F	Florida street address	
		, Florida	
	City	Zin 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:

rt.
To see the second

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 cha	ange(s) here: (Attach additional sheets, if necessary.)
Effective date, if other than the date of filing:	the date this document is filed by the Florida Department of
Signature(s) of a general partner or all general p	partners*:
(*NOTE: Only one current general partner is required to sign removing a "limited liability limited partnership" election stat when adding or removing a "limited liability limited partnership".	tement. Chapter 620, F.S., requires all general partners to sign
	Robert M Picerne
Signature(s) of all new or dissociating general pa	artner(s), if any:
	Robert M Piceme
Filing Fee: \$52.50	
Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	