

**A030000000423**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

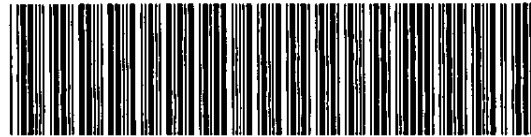
\_\_\_\_\_  
(Document Number)

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

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**JUL - 9 2013**  
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**13 JUL -5 PM 2:33**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Whispering Oaks Housing Partners II, 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:

David Thompson

Contact Person

Herman & Kittle Properties, Inc.

Firm/Company

500 East 96th Street, Suite 300

Address

Indianapolis, IN 46240

City, State and Zip Code

dthompson@hermankittle.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David Thompson

Name of Contact Person

at ( 317 )

663-6814

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$52.50 Filing Fee

☐ \$61.25 Filing Fee  
and Certificate of  
Status

☐ \$105.00 Filing Fee  
and Certified Copy

☐ \$113.75 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  
OF

Whispering Oaks Housing Partners II, Ltd.

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 March 18, 2003, assigned Florida document number A03000000423, 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:**

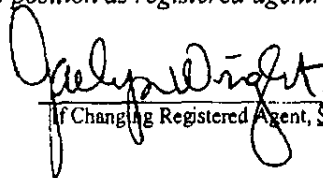
<u>New Principal Office Address:</u> (Must be STREET address)	<u>500 East 96th Street, Suite 300</u> <u>Indianapolis, IN 46240</u>
<u>New Mailing Address:</u> (May be post office box)	<u>500 East 96th Street, Suite 300</u> <u>Indianapolis, IN 46240</u>

**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:**

<u>Name of New Registered Agent:</u>	<u>Registered Agent Solutions, Inc.</u>
<u>New Registered Office Address:</u>	<u>155 Office Plaza Drive, Suite A</u> <i>Enter Florida street address</i>
	<u>Tallahassee</u> , Florida <u>32301</u> <i>City Zip Code</i>

**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.*



Jaclyn Wright, Asst. Secretary

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>
_____	Whispering Oaks	500 East 96th Street	<input checked="" type="checkbox"/> Add
_____	Housing Partners II	Suite 300	<input type="checkbox"/> Remove
_____	GP, LLC	Indianapolis, IN 46240	
_____	Columbia Housing SLP	121 S.W. Morrison Street	<input type="checkbox"/> Add
_____	Corporation	Suite 1300	<input checked="" type="checkbox"/> Remove
_____		Portland, OR 97204	
_____			<input type="checkbox"/> Add
_____			<input type="checkbox"/> Remove
_____			<input type="checkbox"/> Add
_____			<input type="checkbox"/> Remove
_____			<input type="checkbox"/> Add
_____			<input type="checkbox"/> Remove
_____			<input type="checkbox"/> Add
_____			<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.)**

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STATE  
TALLAHASSEE  
FLORIDA

F. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

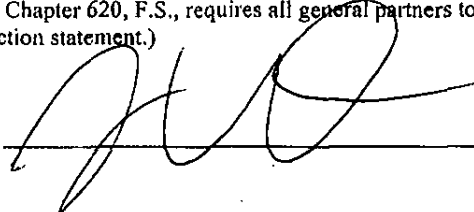
Effective date, if other than the date of filing: \_\_\_\_\_

*(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)*

**Signature(s) of a general partner or all general partners\*:**

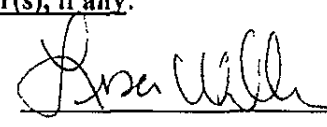
(\*NOTE: Only one current general partner is required to sign this document unless the limited partnership is adding or removing a "limited liability limited partnership" election statement. Chapter 620, F.S., requires all general partners to sign when adding or removing a "limited liability limited partnership" election statement.)

Whispering Oaks Housing Partners II GP, LLC



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

Columbia Housing SLP Corporation



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