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## LIMITED PARTNERSHIP AMENDMENT

WELLS SHOPPING CENTER PARTNERS, LTD.

Certificate of Status	0
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## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 18, 2004

WELLS SHOPPING CENTER PARTNERS, LTD.

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This needs to be sent under limited partnership amendment.

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Tammi Cline Document Specialist FAX Aud. #: EGP040000361 Letter Number: 204A00034675

Division of Corporations - P.O. Box 6327 - Tallahassee, Florida 32314

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04 MAY 18 AM 11: 29
11VISION OF CORPORATION

## STATEMENT OF QUALIFICATION FOR FLORIDA LIMITED LIABILITY LIMITED PARTNERSHIP

1. The name of the himsted partnership as identifi- Wells Shopping Center Fartners, 114	ed in the records of the Florida Department of State:	
Insert limited partnership's Florida document nun or <u>Attach</u> Certificate of Limited Partnership, Affidav partnership filing fees.	nber: <u>A0400000803</u> vit of Capital Contributions and applicable limited	
2. The complete name of the entity after filing St	atement of Qualification shall be:	
Wells Shopping Center Partners, LILP (Must include LLLP of LLLP.)		
<ol> <li>The street address of its chief executive office (if different from current recorded address);</li> </ol>	•	
<ol> <li>The street address of principal office in Florid (if different from above)</li> </ol>	a:	
5. The limited partnership hereby elects to be a limited liability limited partnership.  6. The effective date of this filling shall be:		
7. The name and Florida street address of the par R. Lawar Shaw, Jr. 751 Oak Street, Suite 500 Jacksonville		
The execution of this statement as a partner constitute the facts stated herein are true.  Signed this 14 day of May	itutes an affirmation under the penalties of perjury	
Signature of TWO Partners:	1	
Typed or printed names of partners signing above:	#. Lamar Shaw indiv and as Pres of Skyline Realty Investors.Inc	

Filing Fee: \$25,00 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75