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Florida Department of State
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TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS

LIMITED PARTNERSHIP AMENDMENT
UNIVERSITY VILLAGE AT TALLAHASSEE, LLLP

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$105.00

← should be \$77.50?

77.50

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**STATEMENT OF QUALIFICATION FOR
FLORIDA LIMITED LIABILITY LIMITED PARTNERSHIP**

1. The name of the limited partnership as identified in the records of the Florida Department of State:
UNIVERSITY VILLAGE AT TALLAHASSEE, LLLP

Insert limited partnership's Florida document number: 004000000 937
or

Attach Certificate of Limited Partnership, Affidavit of Capital Contributions and applicable limited partnership filing fees.

2. The complete name of the entity after filing Statement of Qualification shall be:

UNIVERSITY VILLAGE AT TALLAHASSEE, LLLP
(Must include LLLP or L.L.L.P.)

3. The street address of its chief executive office: 15998 NW 49 Avenue, Miami, Florida 33014
(if different from current recorded address):

4. The street address of principal office in Florida:
(if different from above)

5. The limited partnership hereby elects to be a limited liability limited partnership.

6. The effective date of this filing shall be:
X as of the date this document is filed with the Florida Secretary of State
or
a date later than the time of filing:

7. The name and Florida street address of the partnership's agent for service of process:
Paul Feldman, Esq.
407 Lincoln Road, Suite 701
Miami Beach, Florida 33139

The execution of this statement as a partner constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Signed this 4th day of June, 2004.

Signature of TWO Partners:

Typed or printed names of partners signing above: Amram Adar for University Village
Tallahassee, LLC
Paul Feldman

Filing Fee: \$25.00
Certified Copy (optional): \$52.50
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