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(Red	questor's Name)	
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G. MCLEOD

MAY -1 2008

EXAMINER



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SECRETARY OF STATE



April 18, 2008

YAZMIN GIL ALLEN MORRIS COMPANY 121 ALHAMBRA PLAZA PH1 STE 1600 CORAL GABLES, FL 33134

SUBJECT: UNIVERSITY VENTURE, LTD.

Ref. Number: A0400001627

We have received your document for UNIVERSITY VENTURE, LTD. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

The effective date must be specific and cannot be prior to the date of filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6851.

Letter Number: 108A00023333

Gina McLeod Regulatory Specialist II

Division of the property of th

DIVISION OF CORPORATION

08 APR 30 AM 10: 21

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

University Venture, Ltd.			
(Insert name curren	tly on file with Florida	Department of State)	
Pursuant to the provisions of section 620.1 limited liability limited partnership, whose 4-25-2008, adopt	certificate was file		
limited partnership.			
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name here:	of the limited partne	ership or limited liability limited partnership	
(New name must be dist		ain an acceptable suffix.) P., LP, or Ltd.	
Acceptable Limited Liability Limited Partnership s			
B. If amending the registered agent and/or new registered agent and/or the new register	ed office address her		
Name of New Registered Agen	Lany Nem	\ <u>C</u>	
New Registered Office Address	·	121 Alhambra Plaza, Ph1, Suite 1600 (Enter Florida street address)	
Coral Gables		, Florida 33134	
	(City)	, Florida 33134 (Zip 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 Rogistered Agent

C. 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>	Address	Type of Action
	121 Alhambra, Inc.	121 Alhambra Plaza Suite 1600, Coral Gables FL 33134	Add Remove
	ParTNership	121 Alhambra Plaza Suite 1600, Coral Gables FL 33134	_ X Add _ Remove _
			Add Remove
			Add Remove
			Add Remove
			_ Add _ Remove
	partnership or limited liabilit p" status, enter change here:	y limited partnership is amen	ding its "limited liabilit
☐ This Limited P	artnership hereby elects to be a	"Limited Liability Limited Par	tnership."
☐ This Limited P	artnership hereby removes its "	Limited Liability Limited Partn	ership" status.
(NOTE: If adding or	removing" limited liability limited p	artnership" status, all general partn	ers must sign this amendment.
E. If amending any	other information, enter chang	e(s) here: (Attach additional shee	ets, if necessary.)
Please Change r	name of the present Genera	al Partner from 121 Alhambr	a, Inc. To
TAMPA PROPE	RTIES PARTNERSHIP.		

Effective date, if other than the da	te of filing: 01/07/2008	
(Effective date cannot be prior to nor mo State.)	re than 90 days after the date this i	document is filed by the Florida Department of
Signature(s) of a general partne	r or all general partners*:	
(*NOTE: Only one current general part removing a "limited liability limited part when adding or removing a "limited liab	nership" election statement. Chapt	nt unless the limited partnership is adding or er 620, F.S., requires all general partners to sign latement.)
Mi Sel Tree	Esuray	
Phor Tampa Property	es Partnership	
Signature(s) of all new or dissoc	ating general partner(s), if	any:
		-1-1d-1, -1-1d-1/
		· · · · · · · · · · · · · · · · · · ·
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75	