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LIMITED PARTNERSHIP AMENDMENT

HENDRY COUNTY 6500, LTD.

Certificate of Status	1
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STATEMENT OF QUALIFICATION FOR FLORIDA LIMITED LIABILITY LIMITED PARTNERSHIP 15 A 11: 50

1. The name of the limited partner HENDRY COUNTY 6500, LTD.	ership as identified in the records of the Florida Department of Stat
Insart limited northership's Florid	la document number: A0400001968
or mined partnership s riond	ia document number; A0400001988
	tnership, Affidavit of Capital Contributions and applicable limited
2. The complete name of the enti-	ty after filing Statement of Qualification shall be:
HENDRY COUNTY 6500, LLLP	
	(Must include LLLP or L.L.P.)
 The street address of its chief (if different from current recorded address) 	executive office:
4. The street address of principal (if different from above)	office in Florida:
	elects to be a limited liability limited partnership.
6. The effective date of this filing X as of the date this of	shall be: document is filed with the Florida Secretary of State
a date later than the	e time of filing:
CLIFFORD I. HERTZ, P.A.	ddress of the partnership's agent for service of process:
ONE NORTH CLEMATIS ST	
WEST PALM BEACH	, Florida <u>33401</u>
The execution of this statement as hat the facts stated herein are true	a partner constitutes an affirmation under the penalties of perjury
Signed this 13th day of DEC	
on Control of the con	WHER 2004
Signature of TWO Partners:	EMBER 2004
	rigning above: E. WATHE LEGIDE
Signature of TWO Partners:	Style Comments

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