Florida Department of State

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Account Number: 072450003255

Phone : (305)634-3694 Fax Number : (305)633-9696

LIMITED PARTNERSHIP AMENDME

THE PLAZA II AT WELLINGTON GREEN, LTI

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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

June 21, 2005

THE PLAZA II AT WELLINGTON GREEN, LTD. 616 B. ATLANTIC AVE. DELRAY BEACH, FL 33483

SUBJECT: THE PLAZA II AT WELLINGTON GREEN, LTD.

REF: A05000000201

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You can not change the agent for service of process on the statement of qualification. According to our records the agent on this partnership is Mark L. Krall, Esq. Please make the proper corrections.

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, p call (850) 245-6913.

Diane Cushing Document Specialist FAX Aud. #: E05000151204 Letter Number: 805A00042297

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

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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: The Plaza II at Wellington Green, Ltd.
Insert limited partnership's Florida document number: A0500000201 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:
The Plaza II at Wellington Green, LLLP
(Must include I.I.L.II or I.,I.I. P.)
3. The street address of its chief executive office: 2116 N. E. 64th Street (if different from current recorded address): Ft. Lauderdale, FL 33308
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:
7. The name and Florida street address of the partnership's agent for service of processing Mark Krall, Esq.
Delray Beach Florida 33483
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
Typed or printed names of partners signing above: Richard Dale Gentz JV. Mark School Strategy
Filing Fee: \$25.00 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75

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