(((H15000268321 3)))

# Florida Department of State

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Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : COHEN & GRIGSBY, P.C.

Account Number: I20030000042 Phone

: (239)390~1912

Fax Number

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astone@cohenlaw.com Email Address:

# LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION NORTHWEST PROPERTIES II. LTD.

في المساكن ا	
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## CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

NORTHWE				
Insert name current	ly on file	e with Florida	Department o	f State
Pursuant to the provisions of section 620.1 limited liability limited partnership, whose 12/06/2007, assign adopts the following certificate of amendm	certific ed Flor	cate was file	ed with the f	Florida Department of State on A07000001348
This amendment is submitted to amend the follow	wing:			
A. If amending name, enter the new name of here:	of the fi	mited partn	ership or lin	uited liability limited partnership
New name must be dis	nguishe	able and conta	in an acceptab	le suffix.
Acceptable Limited Partnership suffixes: Limited Pa Acceptable Limited Liability Limited Partnership su	vinershi ffixes: L	ip, Limited, L. Imited Liabili	P., LP, or Ltd. ty Limited Par	inership. L.I.,L.P. or I.LL.P.
B. If amending mailing address and/or principal office address here:	rincip	al office ad	idress, <u>ente</u>	r new mailing address and/or
New Principal Office Addres (Muss be STREET address)	<u>\$:</u>			
New Mailing Address: (May be post office box)		<del></del>		
C. If amending the registered agent and/or new registered agent and/or the new registere				r records, enter the name of the
Name of New Registered Agent:		_		
New Registered Office Address:				
	Enter Florida street address			
-	, Florida			
		, (11)		(((H1500026B321 3))))
	Page	e 1 of 3		
				(0.8) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4

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### 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 Registered Agent

D. If amending the general partner(s), enter the name and business address of each general partner being added or removed from our records:

Title Name  CDG Northwest Properties II, LLC  GP	Address  2950 S.W. 27th Avenue Suite 200	Type of Action
	Miami, FL 33133	Remove
		Remove
		Add Remove
		Add: Remove
		Add
		Add
		-

This Limited Partnership hereby elects to be a "Limited Liability Limited Partnership."

This Limited Partnership hereby removes its "Limited Liability Limited Partnership" status.

(NOTE: If adding or removing" limited liability limited partnership" status, all general partners must sign this amendment.)

F. If amending any other information, enter change(s) here:	: (Attach additional sheets, if necessary.)
·	
iffective date, if other than the date of filing:  [fective date cannot be prior to nor more than 90 days after the date this are.)	document is filed by the Florida Department of
ignature(s) of a general partner or all general partners*:	
*NOTE: Only one current general partner is required to sign this documes amoving a "limited liability limited partnership" election statement. Chapthen adding or ternoving a "limited liability limited partnership" election s	ter 620, F.S., requires all general partners to sign
ignature(s) of all new or dissociating general partuer(s), if	any:
ISSOCIATING GENERAL PARTNER:	
DG Worthwest Properties II LLC	
y: Banc of America CDC Special Holding	
ompany, inc., as accorney-in-acc	
New Baldon, Senior Vice President	
WIGOTA DATOR! Santot Alea Stationer	
_	(2) 0 F
iling Fee: \$52.50	(T)
Pertified Copy (optional): \$52.50 Pertificate of Status (optional): \$8.75	
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