

Korey Sweet, McKinnon, Simpson & Vukelja

Attorneys and Counselors at Law
A PARTNERSHIP INCLUDING PROFESSIONAL ASSOCIATIONS

Robert Kit Korey, P.A.
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March 5, 1998

Secretary of State
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

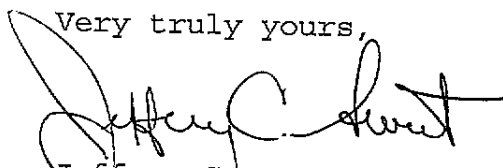
Re: Certificate of Amendment to Limited Partnership
Stonewood Apartments, Ltd.

Gentlemen:

Enclosed please find original Certificate of Amendment to Limited Partnership which we ask be filed with your office. A copy is enclosed to be certified and returned to my office. Our check in the amount of \$105.00 is enclosed in payment of the various fees.

With kind regards, I remain,

Very truly yours,


Jeffrey C. Sweet

JCS/pke

Enclosures

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Name	AK-3-11
Availability	
Document Examiner	
Updater	
Update Verifier	
Acknowledgement	
W. P. Verifier	

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CERTIFICATE OF AMENDMENT TO
LIMITED PARTNERSHIP AGREEMENT AND
CERTIFICATE OF LIMITED PARTNERSHIP OF
STONEWOOD APARTMENTS, LTD., A FLORIDA LIMITED PARTNERSHIP

In accordance with Section 620.101 of the Florida Statutes the undersigned, desiring to further amend the Certificate of Limited Partnership (the "Certificate") for the above-named Florida limited partnership (the "Partnership"), hereby certify as follows:

1. Name. The name of the Partnership is Stonewood Apartments, Ltd.

2. Filing of Certificate. The Certificate was filed on January 16, 1979, with the Florida Secretary of State; was amended by Certificate of Amendment to Limited Partnership Agreement filed March 31, 1982; was further amended by Certificate of Amendment to Limited Partnership Agreement filed April 16, 1982; was further amended by Certificate of Correction to Limited Partnership Amendment filed January 12, 1989; was further amended by Amendment to Limited Partnership Certificate, filed April 13, 1989; was further amended by Certificate of Amendment to Change Registered Agent, dated April 6, 1990; and was finally amended by Certificate of Amendment dated August 29, 1991.

3. Amendment. The Certificate as amended, is hereby amended as follows:

a) In accordance with Article VII of the Limited Partnership Agreement as amended, Robert H. Gillespy, Esquire hereby sells, assigns and transfers his interest in the Limited Partnership to Alberta H. Gillespy.

b) Robert H. Gillespy, Esquire hereby withdraws as a Limited Partner of the Partnership.

c) Alberta H. Gillespy is hereby substituted as a Limited Partner in place of the withdrawing Limited Partner, Robert H. Gillespy, Esquire.

4. The foregoing Certificate of Amendment is hereby adopted by all of the members of the Partnership, and has been executed by the withdrawing Limited Partner, the substituted Limited Partner, the General Partner, and by all limited partners. This withdrawal and substitution is effective upon execution by all parties. This Certificate of Amendment will be filed at the office of the Department of State of the State of Florida, and on such filing the withdrawal of Robert H. Gillespy, Esquire and substitution of Alberta H. Gillespy as a Limited Partner shall be deemed complete and such filing shall become a provision of the Partnership

Agreement and of the Certificate of Limited Partnership.

WITNESS our hands and seals this 12th day of February, A.D., 1992.

WITHDRAWING LIMITED PARTNER:

Scott D Mayban
Lilli O. Carter

Robert H. Gillespy

Robert H. Gillespy, Esquire
155 Aspenwood Drive
Chagrin Falls, Ohio 44022

SUBSTITUTED LIMITED PARTNER:

Scott D Mayban
Lilli O. Carter

Alberta H. Gillespy

Alberta H. Gillespy
155 Aspenwood Drive
Chagrin Falls, Ohio 44022

GENERAL PARTNER:

STONEWOOD OF DUVAL, INC.

Marie W. Davis
Sandra J. Frank

By: Thurman Gillespy, Jr.
Thurman Gillespy, Jr., M.D.
1075 Mason Ave.
Daytona Beach, FL 32117

GENERAL PARTNER:

STONEWOOD OF DUVAL COUNTY, INC.

Marie W. Davis
Sandra J. Frank

By: Thurman Gillespy, Jr.
Thurman Gillespy, Jr., M.D.
President
1075 Mason Avenue
Daytona Beach, FL 32117

LIMITED PARTNERS:

Marie W. Davis
Sandra J. Kruek

Thurman Gillespy, Jr., M.D.
1075 Mason Avenue
Daytona Beach, FL 32117

Marie W. Davis
Sandra J. Kruek

Willis G. Stose, M.D.
1075 Mason Avenue
Daytona Beach, FL 32117

Marie W. Davis
Sandra J. Kruek

Paul M. Dodd, Jr., M.D.
1075 Mason Avenue
Daytona Beach, FL 32117

Marie W. Davis
Sandra J. Kruek

Gilbert A. Martin, Jr., M.D.
1075 Mason Avenue
Daytona Beach, FL 32117

Lynn B. Robb
Sharon L. Haight

P. T. Fleuchaus, D.D.S., M.S.D.
855 Mason Avenue
Daytona Beach, FL 32117

STATE OF FLORIDA

COUNTY OF VOLUSIA

I HEREBY CERTIFY that on this day, before me, a Notary Public duly authorized in the State and County named above to take acknowledgements, personally appeared Thurman Gillespy, Jr., M.D., to me known to be the person who has executed the foregoing Certificate for the purposes therein expressed.

WITNESS my hand and seal in the County and State above

named this 14 day of December, A.D., 1991.

Denise R. Curran
Notary Public, State of Florida
at Large

My Commission expires:

Notary Public, State of Florida
My Commission Expires March 15, 1995
Bonded Thru Troy Fain - Insurance Inc.

STATE OF OHIO

COUNTY OF CUYAHOGA

I HEREBY CERTIFY that on this day, before me, a Notary Public duly authorized in the State and County named above to take acknowledgements, personally appeared Robert H. Gillespy, Esquire, to me known to be the person who has executed the foregoing Certificate for the purposes therein expressed.

WITNESS my hand and seal in the County and State above named this 12 day of FEBRUARY, A.D., 1992.

Scott D. Maybaum
Notary Public, State of OHIO
at Large

My Commission expires:

STATE OF OHIO

COUNTY OF Cuyahoga

SCOTT D. MAYBAUM, ATTORNEY
STATE OF OHIO
My Commission Has
No Expiration Date O.R.C. 147.03

I HEREBY CERTIFY that on this day, before me, a Notary Public duly authorized in the State and County named above to take acknowledgements, personally appeared Alberta H. Gillespy, to me known to be the person who has executed the foregoing Certificate for the purposes therein expressed.

WITNESS my hand and seal in the County and State above named this 12 day of FEBRUARY, A.D., 1992.

Scott D. Maybaum
Notary Public, State of OHIO
at Large

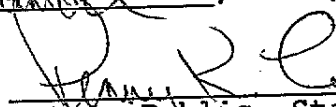
My Commission expires:

STATE OF FLORIDA

COUNTY OF VOLUSIA

I HEREBY CERTIFY that on this day, before me, a Notary Public duly authorized in the State and County named above to take acknowledgements, personally appeared Willis G. Stose, M.D., to me known to be the person who has executed the foregoing Certificate for the purposes therein expressed.

WITNESS my hand and seal in the County and State above named this 14 day of March, A.D., 1991.


Notary Public, State of Florida
at Large
My Commission expires:


Notary Public, State of Florida
My Commission Expires March 15, 1995
Bonded Thru Troy Fain - Insurance Inc.

STATE OF FLORIDA

COUNTY OF VOLUSIA

I HEREBY CERTIFY that on this day, before me, a Notary Public duly authorized in the State and County named above to take acknowledgements, personally appeared Paul M. Dodd, Jr., M.D., to me known to be the person who has executed the foregoing Certificate for the purposes therein expressed.

WITNESS my hand and seal in the County and State above named this 14 day of Dec., A.D., 1991.


Notary Public, State of Florida
at Large

My Commission expires:

Notary Public, State of Florida
My Commission Expires March 15, 1995
Bonded Thru Troy Fain - Insurance Inc.

STATE OF FLORIDA

COUNTY OF VOLUSIA

I HEREBY CERTIFY that on this day, before me, a Notary Public duly authorized in the State and County named above to take acknowledgements, personally appeared Gilbert A. Martin, Jr., M.D., to me known to be the person who has executed the foregoing Certificate for the purposes therein expressed.

WITNESS my hand and seal in the County and State above

named this 14 day of December, A.D., 1991.

[Signature]
Notary Public, State of Florida
at Large

My Commission expires:

Notary Public, State of Florida
My Commission Expires March 15, 1995
Bonded Thru Troy Fain - Insurance Inc.

STATE OF FLORIDA

COUNTY OF VOLUSIA

I HEREBY CERTIFY that on this day, before me, a Notary Public duly authorized in the State and County named above to take acknowledgements, personally appeared P. T. Fleuchaus, D.D.S. M.S.D., to me known to be the person who has executed the foregoing Certificate for the purposes therein expressed.

WITNESS my hand and seal in the County and State above named this 10th day of March, A.D., 1992.

[Signature]
Notary Public, State of Florida
at Large

My Commission expires:

Notary Public, State of Florida
My Commission Expires Feb. 1, 1993
Bonded Thru Troy Fain - Insurance Inc.

FILED

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SECRETARY OF STATE