

Division of Corporations

Page 1 of 1

**A02301**

Florida Department of State  
 Division of Corporations  
 Electronic Filing Cover Sheet

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(((H14000145423 3)))



H140001454233ABCY

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**To:**

Division of Corporations  
 Fax Number : (850) 617-6383

**From:**

Account Name : C T CORPORATION SYSTEM  
 Account Number : FCA000000023  
 Phone : (850) 222-1092  
 Fax Number : (850) 878-5368

25 JUN 18 PM: 25  
 FILED  
 DEPARTMENT OF STATE  
 TALLAHASSEE, FLORIDA

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

**Email Address:** \_\_\_\_\_

14 JUN 18 AM 10:33

RECEIVED  
 STATE OF FLORIDA  
 DEPARTMENT OF STATE  
 TALLAHASSEE, FLORIDA

**LP/LLP AMENDMENT/RESTATEMENT/CORRECTION  
 SOUTH HIAWASSEE VILLAGE, LTD.**

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$105.00

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JUN 19 2014

BRUCH

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** South Hiawassee Village, Ltd.

Name of Florida Limited Partnership or Limited Liability Limited Partnership

The enclosed Certificate of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Russell W. Fleming

Contact Person

American Apartment Management Company, Inc.

Firm/Company

900 South Gay Street, Suite 800

Address

Knoxville, Tennessee 37902

City, State and Zip Code

rlemling@aamci.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Deedra A. Burroughs

Name of Contact Person

at ( 865 )

525-7500 x229

Area Code and Daytime Telephone Number

FILED  
2014 JUN 18 PM12:25  
ATTORNEY GENERAL  
TALLAHASSEE, FLORIDA

Enclosed is a check for the following amount:

\$52.50 Filing Fee

\$61.25 Filing Fee  
and Certificate of  
Status

\$105.00 Filing Fee  
and Certified Copy

\$113.75 Filing Fee,  
Certified Copy, and  
Certificate of Status

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**CERTIFICATE OF AMENDMENT  
TO  
CERTIFICATE OF LIMITED PARTNERSHIP  
OF**

**South Hiawassee Village, Ltd.**

Insert name currently on file with Florida Department of State

Pursuant to the provisions of section 620.1202, Florida Statutes, this Florida limited partnership or limited liability limited partnership, whose certificate was filed with the Florida Department of State on March 2, 1979, assigned Florida document number A07301, adopts the following certificate of amendment to its certificate of limited partnership.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited partnership or limited liability limited partnership here:**

New name must be distinguishable and contain an acceptable suffix.

Acceptable Limited Partnership suffixes: *Limited Partnership, Limited, L.P., LP, or Ltd.*

Acceptable Limited Liability Limited Partnership suffixes: *Limited Liability Limited Partnership, L.L.L.P. or LLLP.*

**B. If amending mailing address and/or principal office address, enter new mailing address and/or principal office address here:**

**New Principal Office Address:**  
(Must be STREET address)

2014 JUN 18 PM 12:55  
FLORIDA  
STATE  
REGISTRY OF STATE  
AGENCY  
HOMESTEAD  
FLORIDA

**New Mailing Address:**  
(May be post office box)

2014 JUN 18 PM 12:55  
FLORIDA  
STATE  
REGISTRY OF STATE  
AGENCY  
HOMESTEAD  
FLORIDA

**C. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

**Name of New Registered Agent:** \_\_\_\_\_

**New Registered Office Address:** \_\_\_\_\_

Enter Florida street address

\_\_\_\_\_ , Florida \_\_\_\_\_  
City Zip Code

**FILED**

**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:**

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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FLORIDA

**FILED**

**E. If the limited partnership or limited liability limited partnership is amending its "limited liability limited partnership" status, enter change here:**

- 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.)  
The General Partner, Condev Corporation, filed a name change and is now  
named AAMCI Corporation

Effective date, if other than the date of filing: \_\_\_\_\_  
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

**Signature(s) of a general partner or all general partners\*:**

(\*NOTE: Only one current general partner is required to sign this document unless the limited partnership is adding or removing a "limited liability limited partnership" election statement. Chapter 620, F.S., requires all general partners to sign when adding or removing a "limited liability limited partnership" election statement.)



AAMCI Corporation  
By: Russell W. Fleming, President

**Signature(s) of all new or dissociating general partner(s), if any:**

2014 JUN 18 PM12:125  
SHERIFF OF FLORIDA  
TALLAHASSEE, FLORIDA

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Filing Fee: \$52.50  
Certified Copy (optional): \$52.50  
Certificate of Status (optional): \$8.75