

**ATTORNEYS TITLE**

Requestor's Name

Address

City/State/Zip

Phone #

Office Use Only

FILED STATIONS  
SECRETARY OF CORPORATIONS  
DIVISION OF CORPORATIONS  
98 AUG 18 PM 1:06

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
3. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
4. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

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DIVISION OF CORPORATIONS

☒ Walk in

☐ Pick up time

ASAP

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input checked="" type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

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-08/18/98--01055--014  
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OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

nyk  
8/18/98

Examiner's Initials

**CERTIFICATE OF AMENDMENT  
TO  
CERTIFICATE OF LIMITED PARTNERSHIP  
OF  
LAKESIDE APARTMENTS LIMITED**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
98 AUG 18 PM 4:09

Pursuant to the provisions of section 620.109, Florida Statutes, this Florida limited partnership, whose certificate was filed with the Department of State on October 3, 1979, adopts the following certificate of amendment to its certificate of limited partnership:

**FIRST  
AMENDMENT**

The partnership agreement is hereby amended to show the following changes in the general partners:

Edward Oakowsky is hereby admitted as a general partner, and specifically as the Operating General Partner, in substitution for Stanley E. Oakowsky who is hereby withdrawn as a general partner.

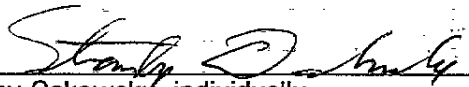
Edward Oakowsky's address is: 116 S.E. Villas Street, Stuart, FL 34994

**SECOND  
EFFECTIVE DATE**

This certificate of amendment and change of partners shall be effective at the time of the filing of this certificate with the Florida Department of State.

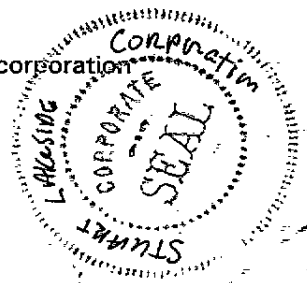
**THIRD  
CONSENT OF ALL EXISTING GENERAL PARTNERS**

The undersigned, as all of the existing general partners, do hereby consent to the substitution of General Partners as shown above.

  
Stanley Oakowsky, individually

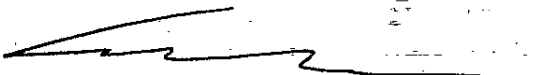
STUART LAKESIDE CORPORATION, a Florida corporation

BY:   
Stanley E. Oakowsky, President



**FOURTH  
ACCEPTANCE OF NEW GENERAL PARTNER**

The undersigned, as successor General Partner to Stanley Oakowsky, does hereby agree to be bound by the Partnership Agreement, as Restated and Amended, to the same extent and on the same terms as each predecessor General Partner.

  
Edward Oakowsky

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
98 AUG 18 PM 4:09

FIFTH  
CONSENT OF SOLE EXISTING LIMITED PARTNER

The undersigned, as sole limited partner, hereby consents to the substitution of General Partners as shown above and designates Edward Oakowsky as Operating General Partner.

REAL ESTATE ASSOCIATES LIMITED III, a California limited partnership

BY: National Partnership Investments Corp. its corporate general partner

By: NA

Printed Name: Warren I. Harrison

Its: SVP

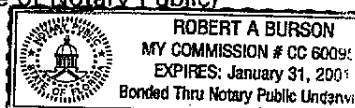
STATE OF FLORIDA  
COUNTY OF MARTIN

The foregoing instrument was acknowledged before me this 21st day of May 1997, by Stanley Oakowsky, individually and as president of Stuart Lakeside Corporation, a corporation organized under the laws of the State of Florida, and by Edward Oakowsky, both of whom are personally known to me.

Robert A. Burson

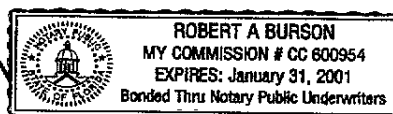
(Signature of Notary Public)

(Notary Seal)



(Print, type, or stamp commissioned name of Notary Public)

ROBERT A. BURSON



# CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

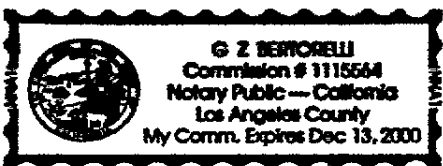
State of California

County of Los Angeles

On JAN 15, 1998 before me, GRACE Z. BERTORELLI, Notary Public

personally appeared WARREN I. HARRISON

- ☒ personally known to me  
☐ proved to me on the basis of satisfactory evidence



to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s); or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Grace Z. Bertorelli  
Signature of Notary Public

## OPTIONAL

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

## Description of Attached Document

Title or Type of Document: \_\_\_\_\_

Document Date: \_\_\_\_\_ Number of Pages: \_\_\_\_\_

Signer(s) Other Than Named Above: \_\_\_\_\_

## Capacity(ies) Claimed by Signer(s)

Signer's Name: \_\_\_\_\_

- ☐ Individual  
☐ Corporate Officer  
Title(s): \_\_\_\_\_  
☐ Partner — ☐ Limited ☐ General  
☐ Attorney-in-Fact  
☐ Trustee  
☐ Guardian or Conservator  
☐ Other: \_\_\_\_\_

Signer Is Representing: \_\_\_\_\_

RIGHT THUMBPRINT  
OF SIGNER  
Top of thumb here

Signer's Name: \_\_\_\_\_

- ☐ Individual  
☐ Corporate Officer  
Title(s): \_\_\_\_\_  
☐ Partner — ☐ Limited ☐ General  
☐ Attorney-in-Fact  
☐ Trustee  
☐ Guardian or Conservator  
☐ Other: \_\_\_\_\_

Signer Is Representing: \_\_\_\_\_

RIGHT THUMBPRINT  
OF SIGNER  
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