A-11000000863

(Re	questor's Name)	
. (Ad	dress)	• ,
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(Cit	y/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

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12 MAY 15 AMIL: 05

PEPPLE CANTU SCHMIDT PLLC

1501 Western Avenue, Suite 600, Seattle, WA 98101

Jeffrey C. Steinert (206) 625-9984 Direct jsteinert@pcslegal.com

May 2, 2012

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: SP Carver Gardens LP

SP Carver Gardens GP, Inc.

Dear Sir or Madam:

Enclosed for filing please find the Certificate of Amendment to Certificate of Limited Partnership of SP Carver Gardens LP and the Articles of Amendment to Articles of Incorporation of SP Carver Gardens GP, Inc., along with checks to cover the filing fees.

If you have any questions, please do not hesitate contacting me.

Very truly yours,

Jeffrey C. Steinert Administrator

COVER LETTER

TO:	Registration Division of	Section Corporations		
SUBJ	JECT:	SP	Carver Gardens L	Р
	N	ame of Florida Limited Pa	stnership or Limited Liabili	y Limited Partnership
The e	nclosed Certif	icate of Amendment a	and fee(s) are submitted	for filing.
Please	e return all cor	respondence concerni	ing this matter to:	
		Jeffrey C. Steinert		
		Contact Person		
	Pepp	le Cantu Schmidt P	LLC	
		Firm/Company		
	1501 W	/estern Avenue, Sui	ite 600	
		Address	······································	
		Seattle WA 98101		
		City, State and Zip Code	· · · · · · · · · · · · · · · · · · ·	
	iet	einert@pcslegal.co	m	
E		be used for future annua		
For fu	ırther informat	tion concerning this m	atter, please call:	
	Jeffrey	C. Steinert	at (206)	625-9984
	Name of Contr	act Person	Area Code and Day	time Telephone Number
Enclo	sed is a check	for the following amo	ount:	
√3 52	2.50 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:		MAILING A	ADDRESS:	
Registration Section		Registration Section		
Division of Corporations		Division of Corporations		
Clifton Building		P. O. Box 6327		
	Executive Centassee, FL 32:		Tallahassee,	FL 32314

FILED

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

12 MAY 15 AM II: 05

SHIP SECRETARY OF STATE TALLAHASSEE, FLORIDA

	er Gardens LP
Insert name currently on	file with Florida Department of State
limited liability limited partnership, whose certification November 21, 2011, assigned Flux	Florida Statutes, this Florida limited partnership or ficate was filed with the Florida Department of State on orida document numberA1100000863,
adopts the following certificate of amendment to	o its certificate of limited partnership.
This amendment is submitted to amend the following	:
A. If amending name, enter the new name of the here:	limited partnership or limited liability limited partnership
SP S	Sunrise LP
	shable and contain an acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Partner. Acceptable Limited Liability Limited Partnership suffixes.	ship, Limited, L.P., LP, or Ltd. : Limited Liability Limited Partnership, L.L.L.P. or LLLP.
B. If amending mailing address and/or princ principal office address here:	ipal office address, enter new mailing address and/or
New Principal Office Address:	2430 Estancia Blvd., #101
(Must be STREET address)	Clearwater, FL 33761
New Mailing Address: (May be post office box)	2430 Estancia Blvd #114 Clearwater, FL 33761
C. If amending the registered agent and/or regis new registered agent and/or the new registered off	tered office address on our records, enter the name of the lice address here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida City Zin Code
	City Zin Code

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>	Name	Address	Type of Action
<u>GP</u> sp	Carver Gardens GP. Inc.	.2430 Estancia Blvd., #101 Clearwater, FL 33761	Add Remove
GP	SP Sunrise GP. Inc.	2430 Estancia Blvd #114 Clearwater, FL 33761	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
	partnership or limited liability p" status, enter change here:	limited partnership is amend	ling its "limited liability
This Limited	Partnership hereby elects to be	a "Limited Liability Limited Pa	rtnership."
This Limited	Partnership hereby removes its	"Limited Liability Limited Par	tnership" status.

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

ignature(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 moving a "limited liability limited partnership" election statement. Chapter 620, F.S., requires all general partners to sign ten adding or removing a "limited liability limited partnership" election statement.) P Sunrise GP Inc. P Carver Gardens GP, Inc. P Carver Gardens GP, Inc. P Carver Gardens GP, Inc. SS2.50	F. If amending any other information, enter change(s) here: (Attach addition	un arrows, y ricousaury.
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P Carver Gardens GP, Inc. P Carver Gardens GP,	By: J. David Page, President	
P Carver Gardens GP, Inc. P Carver Gardens GP,		PA N
P Carver Gardens GP, Inc. P Carver Gardens GP,		
y: J. David Page President Siling Fee: \$52.50	Signature(s) of all new or dissociating general partner(s), if any:	ASS TO
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iling Fee: \$52.50	D-0 1-3	8 H 5
	By: J. David Page President	
		<u> </u>
	Certified Copy (optional): \$52.50	