6/3/2013_10:29:40 From: To: 8506176383

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

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

RWWII Yddiess:	

LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION ORLANDO LEASED HOUSING ASSOCIATES I, LIMITED PARTNER

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

C. LEWIS

JUN 4-2013

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

		COVE	er letter		
TO:	Registration of	n Section f Corporations			
SUBJ	ECT:	ORLANDO LEASED HOU	SING ASSOCIATES I, LIN	MITED PARTNERSHIP	
		Name of Florida Limited Pa	rtnership or Limited Liabilit	y Limited Partnership	
The e	nclosed Cert	ificate of Amendment a	and fee(s) are submitted	for filing.	
Please	e return all co	orrespondence concerni	ng this matter to:		
		John M. Stem			
		Contact Person			
		Winthrop & Weinstine, P.A.			
		Firm/Company			
	22:	5 South Sixth Street, Suite 3.	500		
	-	Address			
		Minneapolis, MN 55402			
-		City, State and Zip Code			
		J\$tern@winthrop.com			
Е	-mail address:	(to be used for future annual	report notification)		
For fi	irther inform	ation concerning this m	atter, please call:		
	Jol	nn M. Stern	at (612)	604-6588	
	Name of Co	ntact Person	Area Code and Day	time Telephone Number	
Enclo	sed is a chec	k for the following amo	ount:		
\$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	
STRE	ET ADDRI	ess:	MAILING.	ADDRESS:	
	tration Section		Registration Section		
Division of Corporations		Division of Corporations			
Clifton Building 2661 Executive Center Circle		P. O. Box 6327 Tallahassee, FL 32314			
	assee, FL 3		i ananassee,	PL 32314	

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13 JUN -3 AM 8: 00

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP

		OF	4	
ORLANDO LEASED HO	USING A	SSOCIATES I. LIMITE	D PARTNERS	HIP
ORLANDO LEASED HOUSING ASSOCIATES I, LIMITED PARTNERSHIP Insert name currently on file with Florida Department of State				· · · · · · · · · · · · · · · · · · ·
Pursuant to the provisions of section 620. limited liability limited partnership, whos December 29, 2011, assig	e certificened Flor	ate was filed with the	ne Florida De er /	partment of State on
adopts the following certificate of amenda	nent to i	ts certificate of limit	ed partnersh	ip.
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name here:	of the li	mited partnership or	limited liabil	ity limited parinership
New name must be d	istinguish	able and contain an acce	ptable suffix.	
Acceptable Limited Parmership suffixes: Limited Acceptable Limited Liability Limited Parmership				I.I.P. or III.P
B. If amending mailing address and/or principal office address here:	-	•	•	
New Principal Office Addre	<u> </u>	2001 West Blue Hero	on Boulevard	
(Musi be STREET address)		Riviera Beach, Florid	a 33404	
New Mailing Address: (May be post office box)				
C. If amending the registered agent and/onew registered agent and/or the new registered			our records	, enter the name of the
Name of New Registered Agent:	TPI Co	mmunities, LLC		·
New Registered Office Address:	2001 V	Vest Blue Heron Boule		
		Enter Florida	street addres	.
		Riviera Beach	, Florida _	33404
		City		Zip Code

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New Registered Agent's Signature, if changing Registered Agent:

SELON TAKE SE STATE TABLABASSES, ELONDAS

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 Repaired 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 L13000077	Address	Type of Action
	TP) Communities, LLC	2001 West Blue Heron Boulevar Rivera Beach, Florida 33404	d Add Remove
, , ,,, =,,,,,	Orlando Leased Housing Associates SLP I, LLC	2905 Northwest Blvd., Saite 150 Plymouth, Minnesota 55441	☐ Add ☑ Remove
			☐ Add ☐ Remove
			Add Remove
			Add Remove
			Add Removo
	ted partnership or limited liabili ership" status, enter change here:		ing its "limited liability
This Lin	nited Partnership hereby elects to b	e a "Limited Liability Limited Par	tnership."
This Lin	nited Partnership hereby removes i	ts "Limited Liability Limited Part	nership" status.
(NOTE: If addit	ng or removing" limited llability limited j	partnership" status, all general partner	r must sign this amendment.)

Page 2 of 3

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F. If amending any other information, enter ch	THE ATT SEE, FIL OF 19A 1996) here: (Attach additional chems, (Incressory)
Effective date, if other then the date of filing:	r the date this document is filted by the Florida Department of
Signature(s) of a general partner or all general	DBTitleta#:
(*NOTE: Only one current general partner is required to sig removing a "limited liability limited pertnership" election sto when adding or removing a "limited liability limited partners	lement. Chapter 620, F.S., requires all general partners to sign
	By: (It:
Signaturaist of all now or dissociating general pa	Orlando Lossind Housing Associates SLP1, LLC
	British Moorhouse HE Sp. Vice President
Filing Fee: \$52.50 Certified Copy (optional): \$32.50 Destinate of Status (optional): \$8.75	

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