Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (350) 617-6383

From:

Account Name : AKERMAN LLP - JACKSONVILLE

Account Number : 105543000740 Phone : (904)798-3700 Fax Number : (904)799-3730

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

. Email Address:

LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION RIVERWOOD APARTMENTS, LTD.

Certificate of Status	0
Certified Copy	0
Page Count	04
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Electronic Filing Menu Corporate Filing Menu

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COVER LETTER

TO: Registration Division of	Section Corporations			
SUBJECT: Riverwo	ood Apartments, Ltd.			
N.	ame of Florida Limited Pa	tnership or Limit	ed Liabili	ty Limited Partnership
The enclosed Certif	icate of Amendment a	nd fee(s) are st	ıbmitted	for filing.
Please return all cor	respondence concerni	ig this matter t	o:	
Christopher McCranie				•
	Contact Person			
Akerman LLP	Firm/Company			
	Firm/Company		· 	
50 North Laura Street, 5	Suite 3100			
	Address			
Jacksonville, FL 32202				
	City, State and Zip Code			
E-mail address: (10	be used for future annual	report notification	n)	
For further informat	ion concerning this ma	atter, please ca	11:	
Christopher McCranie		at (598-	8636
Name of Conta	et Person	Area Cod	e and Day	time Telephone Number
Encloséd is a check	for the following anio	unt:		
\$ \$52.50 Filing Fee	CIS61.25 Filling Fee and Certificate of Status	□\$165.00 Fill and Certified (ing Pee Copy	☐\$113.75 Filing Fee, Certified Copy, and Certificate of Status
Mailing Address:			et Addr	
Registration Section			istration	
Division of Corpora	Division of Corporations The Centre of Tallahassee			
P.O. Box 6327 Tallahassee, FL 323	14			n rummassee nroe Street, Suite 810
rananasse, F1. Jul	17			FL 32303

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

Riverwood Apartments, Ltd.	an alk martin by	and the same of Class.		
losert name currently on	me with Floriga De	partment of State		
Pursuant to the provisions of section 620.1202, limited liability limited partnership, whose certi 9/22/1981	ficate was filed v	vith the Florida Dep	partnership coartment of St	ate on
adopts the following certificate of amendment to	its certificate o	f limited partnership).	
This amendment is submitted to amend the following	:			
A. If amending name, enter the new name of the	limited partners	hip or limited liabili	ty limited par	<u>mership</u>
<u>here</u> :				2621
New name must be distingui-	shable and contain t	in acceptable suffix.		702dtt#P -
Acceptable Limited Partnership suffixes: Limited Partner. Acceptable Limited Liability: United Partnership suffixes.	ship, Limited, L.P., Limited Liability L	LP, or Ltd. imited Partnership, L.L	l.P. or LLLP	2-3
B. If amending mailing address and/or princ principal office address here:	ipal office addr	ess, <u>enter new mai</u>	ling address	and/or F
New Principal Office Address:				0/2
(Must be STREET address)				
New Mailing Address; (May be post office box)				
C. If amending the registered agent and/or registe registered agent and/or the new registered office a	red office address (ddress here:	s on our records, <u>ente</u>	e <u>r the name of</u>	the new
Name of New Registered Agent:				
New Registered Office Address:	Enter 1	Torida street address	,	
		Florida		
	City	, Florida Zi	ip Code	

Page 1 of 3

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 t
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:

Title	Name	Address	Type of Action
<u>GP</u>	Empirian Lexford GP New 3, LLC	333 Earle Ovington Blvd Uniondale, NY 11553	_ □ Add ■ Remove
<u>GP</u>	Interstate Realty Hordings XXIV, ELC	333 Earle Ovington Blvd Uniondale, NY 11553	■ Add □ Remove
			☐ ☐ Add ☐ ☐ Remove
			□ Add _ □ Remove
			_
· <u> </u>			☐ Add ☐ Remove

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

(I)	This Limited	Partnership hereby c	lects to be a	"Limited Liability	Limited Partnership."
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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)

Page 2 of 3

F. If amending any other information, enter ch	range(s) here: (Attach additional sheets, if necessary.)
Effective date, if other than the date of filing: (Effective date cannot be prior to nor more than 90 days after State.) Note: If the date inserted in this block does not meet the app be listed as the document's affective date on the Department	er the date this document is filed by the Florida Department of dicable statutory filing requirements, this date will not of State's records.
Signature(s) of a general partner or all general	
(*NOTE: Only one current general partner is required to sign removing a "limited liability limited partnership" election stawhen adding or removing a "limited liability limited partnership"	itement. Chapter 620, F.S., requires all general partners to sign
INTERSTATE REALTY HOLDINGS XXIV, LLC	
Name: Gianni Ottaviano	
(New General Partner)	
Signature(s) of all new or dissociating general p	artner(s), if any:
INTERSTATE REALTY HOLDINGS XXIV, LLC	EMPIRIAN LEXFORD GP NEW 3, LLC
By: 15.1	By (Map / no ferensles
Name: Gianni Otlaviano	Name. Max Profesorske
(New General Partner)	(Dissociating General Partner)
Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	

Page 3 of 3