A14000000256

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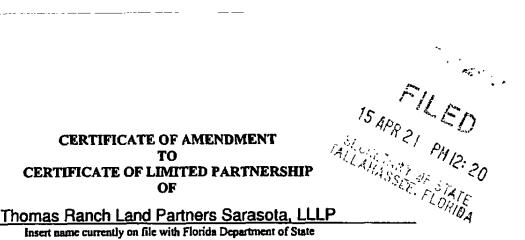
CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500				
ACCOUNT NO. : 120000000195 REFERENCE : 597545 7894067 AUTHORIZATION : \$ 52.50				
ORDER DATE : April 21, 2015 ORDER TIME : 1:19 PM ORDER NO. : 597545-030 CUSTOMER NO: 7894067				
DOMESTIC AMENDMENT FILING NAME: THOMAS RANCH LAND PARTNERS SARASOTA, LLLP				
EFFECTIVE DATE:				
XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING				

EXAMINER'S INITIALS:

CONTACT PERSON: Lydia Cohen -- EXT# 62974

CERTIFICATE OF LIMITED PARTNERSHIP



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 _, assigned Florida document number _ A14000000256 05/14/2014 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 <u>here:</u> Winchester Florida Ranch, LLLP 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: c/o Mattamy Homes New Principal Office Address: 1900 Summit Tower Blvd., Suite 500 (Must be STREET address) Orlando, FL 32810 New Mailing Address: c/o Mattamy Homes 1900 Summit Tower Blvd., Suite 500 (May be post office box) Orlando, FL 32810 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:

City

Enter Florida street address

Florida

Zip Code

Name of New Registered Agent:

New Registered Office Address:

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

	provisions of all statutes relative and accept the obligations of the control of		le performance of my duties, and lent.
		If Changing Registered Age	ent, Signature of New Registered Agent
D. If amending added or remove	the general partner(s), <u>enter t</u> ed from our records:	he name and business addr	ess of each general partner being
<u>Title</u>	<u>Name</u>	Address	Type of Action
	**************************************		AddRemove
			Add Remove
			Add
	•		Add Remove
	••		Add Remove

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to

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

Remove

This Limited Partnership hereby elects to be a "Limited Liability Limited Partnersh	ւլե.,,
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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.)

F. If amending any other info	rmation, en	iter change(s	here: (Attach additional sheets, if necessary.)
			
Effective date, if other than the da			
(Effective date cannot be prior to nor mo State.)	re than YU dd	ays after the da	te this document is filed by the Florida Department of
Clauston (a) of a consult control		?4	.
Signature(s) of a general partner	r or all ger	neral partne	<u>rs*:</u>
	nership" elec lity limited p neral Partner	tion statement, partnership" ele	ocument unless the limited partnership is adding or Chapter 620, F.S., requires all general partners to sign ction statement.)
By: James Leiferman, Authorized Manag	er mage:		

' Y			
*			
Signature(s) of all new or dissoci	ating gene	eral partner	(s), if any:
	-		
Filing Fee:	\$52.50		
Certified Copy (optional):	\$52.50 \$52.50		
Certificate of Status (optional):	\$8.75		