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| . (Re | equestor's Name) | |
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| (Ac | Idress) | |
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| (Ci | ty/State/Zip/Phone # | (#) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bı | ısiness Entity Name | 9) |
| (De | ocument Number) | |
| Certified Copies | _ Certificates o | of Status |
| Special Instructions to | Filing Officer: | 1087 |
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LANGDALE VALLOTTON, LLP

ATTORNEYS AT LAW A LIMITED LIABILITY PARTNERSHIP 1007 NORTH PATTERSON STREET P. O. BOX 1547

WILLIAM P. LANGDALE, JR. WILLIAM P. LANGDALE, III ROBERT A. PLUMB, JR.* J. DANIEL SCHERT WILLIAM C. NIJEM, JR. CHRISTINA L. FOLSOM JESSICA YOUNG

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JOSEPH E VALLOTTON (1945-2006)

TELEPHONE (229) 244-5400 FACSIMILE (229) 244-0453

March 17, 2009

IN REPLY PLEASE REFER TO FILE

090181/DS VIA CERTIFIED MAIL RETURN RECEIPT REQUESTED

Registration Section **Division of Corporations** P.O. Box 6327 Tallahassee, Florida 32314

Reinstatement of and Amendment to Park Place, LTD and Lake Wales, LTD

ENCLOSURES;

- 1. Limited Partnership Reinstatement Form for Park Place, LTD;
- 2. Certificate of Amendment to Certificate of Limited Partnership of Park Place, LTD;
- 3. Limited Partnership Reinstatement Form for Lake Wales, LTD;
- 4. Certificate of Amendment to Certificate of Limited Partnership of Lake Wales, LTD;
- 5. Check in the amount of \$23,105.00; and
- 6. Self-addressed stamped envelope.

Dear Sir or Madam:

Please find enclosed the above-referenced documents for reinstatement of Park Place, LTD and Lake Wales. LTD. Please note that one of the general partners of Lake Wales, Ltd is Xebec, Incorporated, a corporation in good standing with the Secretary of State of Florida. Simultaneously with mailing these documents to you, I am also mailing an Amendment to the Amendment Section which will change Xebec, Incorporated's mailing address to that which I have listed on the reinstatement form. In the event of a discrepancy between your records of Xebec, Incorporated's address and the address listed on the reinstatement form, please contact the Amendment Section to determine whether they have had a chance to process the Amendment I am sending to them.

Enclosed is a check in the amount of \$23,105.00, which represents the following: reinstatement fees of \$11,500.00 and amendment fees of \$52.50 for Park Place, LTD; and reinstatement fees of \$11,500.00 and amendment fees of \$52.50 for Lake Wales, LTD. Neither Park Place, LTD nor Lake Wales, LTD received prior notices and therefore both request that no penalties be levied.

Please file the above-referenced documents and return a filed copy to my office. A return envelope is provided for your convenience. If you have any questions or need anything further, please do not hesitate to contact me.

Very truly yours,

Jessida Young

JY/nd

Marie Wheaton cc:

Enclosures

COVER LETTER

| TO: Registration Division of | n Section Corporations | | | |
|------------------------------|--|--|--|--|
| SUBJECT: <u>Lake</u> | e Wales, LTD Name of Florida Limited Par | rtnership or Limited Liabilit | y Limited Partnership) | |
| The enclosed Certi | ficate of Amendment a | nd fee(s) are submitted | for filing. | |
| Please return all co | rrespondence concerni | ng this matter to: | | |
| Jessica Young | • | | | |
| | (Contact Person) | | | |
| Langdale Vallotton, I | _LP | | | |
| | (Firm/Company) | | | |
| P.O. Box 1547 | | | | |
| 1.0.00 | (Address) | ··· | | |
| | | | | |
| Valdosta, Georgia 3 | 1603-1547 (City, State and Zip Code) | | | |
| | (City, State and Zip Code) | | | |
| For further informa | ntion concerning this m | atter, please call: | | |
| Jessica Young | | at (229) 244 | -5400 | |
| (Name of Co | ntact Person) | (Area Code and D | aytime Telephone Number) | |
| Enclosed is a checl | k for the following amo | unt: | | |
| ₹ \$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 | |
| STREET ADDRE | ESS: | MAILING A | ADDRESS: | |
| Registration Section | | Registration Section | | |
| Division of Corporations | | Division of Corporations | | |
| Clifton Building | | P. O. Box 6327 | | |
| 2661 Executive Ce | | Tallahassee, | FL 32314 | |
| Tallahassee, FL 32 | 2301 | | | |

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

| Lake vvales, LTD | | | . 5 |
|--|---------------------------------|--|----------------|
| (Insert name currently on f | ile with Florida De | partment of State) | |
| Pursuant to the provisions of section 620.1202, Flimited liability limited partnership, whose certif 04/01/1983, assigned Florida. | icate was filed vorida document | vith the Florida Department of S number 4 4258 | |
| adopts the following certificate of amendment to | its certificate of | f limited partnership. | |
| This amendment is submitted to amend the following: | | | |
| A. If amending name, enter the new name of the here: | limited partners | nip or limited liability limited par | <u>tnershi</u> |
| Lake Wales Townhomes, LTD . | | | |
| (New name must be distinguish | hable and contain | an acceptable suffix.) | |
| Acceptable Limited Partnership suffixes: Limited Partners Acceptable Limited Liability Limited Partnership suffixes: | | | 44 |
| B. If amending mailing address and/or princi | ipal office addr | • | |
| principal office address here: | | | BAR 2 |
| New Principal Office Address: | | | ഗ |
| (Must be STREET address) | | | |
| | | | ယ္ 🔮 |
| New Mailing Address: | | | |
| (May be post office box) | | | , , |
| | | | |
| C. If amending the registered agent and/or regist | tarad affica addr | ace an aur ragards, antar tha nan | ne of th |
| new registered agent and/or the new registered offi | | ess on our records, enter the nan | ic or th |
| | | | |
| Name of New Registered Agent: | | | |
| New Registered Office Address: | | | |
| | (Enter | Florida street address) | |
| | | , Florida | |
| | (City) | (Zip 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 nam | e and | business | address | of eac | h general | partner | being |
|----|-------------------------------------|---------------|-------|----------|---------|--------|-----------|---------|-------|
| | led or removed from our records: | | | | | | | | |

| <u>Title</u> | <u>Name</u> | <u>Address</u> | Type of Action |
|--------------|-------------|----------------|----------------|
| | | | ☐ Add ☐ Remove |
| | | | Add Remove |
| <u>_</u> | | | Add Remove |
| | | | ☐ Add ☐ Remove |
| | | | Add Remove |
| | | | Add Remove |

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

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

[☐] This Limited Partnership hereby removes its "Limited Liability Limited Partnership" status.

| F. If amending any other information, enter | change(s) here: (Attach additional sheets, if necessary.) |
|---|--|
| | |
| | |
| | |
| | |
| Effective date, if other than the date of filin (Effective date cannot be prior to nor more than 90 State.) | ng: |
| Signature(s) of a general partner or all g | general partners*: |
| | ired to sign this document unless the limited partnership is adding or lection statement. Chapter 620, F.S., requires all general partners to sign d partnership" election statement.) |
| Marie What on | |
| | |
| | |
| | |
| Signature(s) of all new or dissociating ge | eneral partner(s), if any: |
| | |
| | |
| | |
| | |
| | |
| Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75 | |