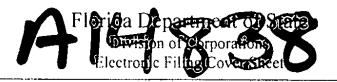
Division of Corporations

https://efile.sunbiz.org/scripts/efilcovr.exe

HARRISJR/CRESCENT



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000092918 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FISHER, TOUSEY, LEAS & BALL

Account Number : I19990000021 Phone : (904)356-2600 Fax Number : (904)355-0233

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 CRESCENT LAKES APARTMENTS LTD.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$52.50

Electronic Filing Menu

Corporate Filing Menu

Help

H22000092918 3

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

Crescent Lakes Apartments Ltd.					_	
Insert name current	ly on file	with Florida Dep	artment of State			
Pursuant to the provisions of section 620.12 limited liability limited partnership, whose July 7, 1983, assign adopts the following certificate of amendm	certifica ed Florio	ite was filed w da document r	rith the Florida Depumber A14838	partment of S		١
This amendment is submitted to amend the follo			•	•		
A. If amending name, enter the new name of here:	_	nited partnersh	nip or limited liabili	ity limited pa	rtnersh	<u>ip</u>
CRESCENT LAKES	APART	MENTS, LLLI)			
New name must be dis	tinguishab	ole and contain a	n acceptable suffix.			•
Acceptable Limited Partnership suffixes: Limited Partnership suffixed Limited Limited Partnership suffixed Partner	uffixes: Lii	mited Liability U	imited Partnership, L.	-	~ >	or
principal office address here:	h		, <u></u>		2 H	_
New Principal Office Address (Muss be STREET address)	<u> </u>			25. 25.	AR II P	AND FILEE
New Mailing Address: (May be post office box)	- - -			77	PM 4: 17	
C. If amending the registered agent and/or r registered agent and/or the new registered of	egistered <u>ffice addr</u>	office address ress here:	on our records, <u>ent</u>	ter the name o	of the ne	<u>ew</u>
Name of New Registered Agent:	Crescent	Lakes Apartmer	nts GP, LLC			
New Registered Office Address:	1365-R S	S.R. 206 East Enter F	Florida street uddress	5		
	St. Augu	stine City	, Florida 33	2086 Zip Code		
	St. Augu		, Florida 33	2086 Zip Code		

H22000092918 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 I am familiar with and accept the obligations of my position as registered agent.

DocuSigned by:
Card B. Harris
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>	Crescent Lakes Apartments GP, LLC	1365-R S.R. 206 East St. Augustine, Florida 32086	_ 😭 Add _ 🔾 Remove
GP	J. Roger Harris	1365-R S.R. 206 East St. Augustine, Florida 32086	_
			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:
- This Limited Partnership hereby elects to be a "Limited Liability Limited Partnership."
- 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.)

H22000092918 3

F. If amending any other info	rmation, e	enter change(s) here: (Attach additional sheets, if necessary.)
		·
Effective data if other than the de	o of filin	
Effective date, if other than the dat (Effective date cannot be prior to nor mo. State.)		ag:
Note: If the date inserted in this block do be listed as the document's effective date		et the applicable statutory filing requirements, this date will not partment of State's records.
Signature(s) of a general partner	r or all ge	eneral partners*:
	nership" ele	ired to sign this document unless the limited partnership is adding or ection statement. Chapter 620, F.S., requires all general partners to sign a partnership "election statement.)
CRESCENT LAKES APARTMENTS GP By:	, LLC	
Carol B. Harris		
75CASABDE STARGA		
	<u>-</u> -	
Signature(s) of all new or dissoci	ating gar	neral partner(s) if any
Signature(s) of an new of dissoci	anng ger	neral partner(s), il any:
Filing Fee: Certified Copy (optional):	\$52.50 \$52.50	
Certificate of Status (optional):	\$8.75	