

05-22-2017 5:19PM No. 4341 P. 3
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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 : ZIMMERMAN, KISER, & SUTCLIFFE, P.A.
Account Number : I19990000006
Phone : (407)425-7010
Fax Number : (407)425-2747

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

Email Address: jlagmay@windovergroup.com

**LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION
BRISTOL MANOR, LTD.**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$52.50

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2017 DEC 22 PM 5:31

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BRISTOL MANOR, LTD.

Name of Florida Limited Partnership or Limited Liability Limited Partnership

The enclosed Certificate of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Amy Jellicorse, Esq.

Contact Person

Zimmerman Kiser Sutcliffe, P.A.

Firm/Company

315 E. Robinson Street, Suite 600

Address

Orlando, FL 32801

City, State and Zip Code

jlagmay@wendovergroup.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Amy Jellicorse

at (407) 425-7010

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$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 ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

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

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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 name and business address of each general partner being added or removed from our records:

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
GP	AHI Bristol Manor, LLC	1105 Kensington Place Drive Suite 200 Altamonte Springs, FL 32714	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> 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.)

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F. If amending any other information, enter change(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 the date this document is filed by the Florida Department of State.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Signature(s) of a general partner or all general partners*

(*NOTE: Only one current general partner is required to sign this document unless the limited partnership is adding or removing a "limited liability limited partnership" election statement. Chapter 620, F.S., requires all general partners to sign when adding or removing a "limited liability limited partnership" election statement.)

Bristol Manor GP, LLC a Florida limited liability company

By: Jonathan L. Wolf, Manager

Signature(s) of all new or dissociating general partner(s), if any:

AHI Bristol Manor, LLC, a Florida limited liability company

By: Affordable Housing Institute, Inc., a Florida corporation

By: Bryan C. Hartnett, President

Filing Fee: \$52.50
 Certified Copy (optional): \$52.50
 Certificate of Status (optional): \$8.75

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