

Division of Corporations Electronic Filing Cover Sheet

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.

(((H210002371253)))



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

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ZIMMEPMAN, 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@WENDOVERGROUP.COM

LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION FULHAM TERRACE, LTD.

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

JUN 17 2021

A. LUNI

SECRETARY OF STATE

COVER LETTER

TO:	Registration Division of 0	Section Corporations				
SUBJ	ECT:	FULF	HAM TI	ERRACE	, LT	.D
0.000		ame of Florida Limited P				
The en	iclosed Certif	icate of Amendment	and fee(s) arc submi	tted f	for filing.
Please	retum all cor	respondence concern	ing this r	natter to:		
	N. DW	AYNE GRAY, JR.,	ESQ.			
		Contact Person				
***********	ZIMMERM	AN KISER SUTCLI	FFE, P.	A		
		Firm/Company				
	315 E. RO	SINSON STREET,	SUITE 6	00		
		Address				
	0	RLANDO, FL 3280	.1			
		City, State and Zip Code	1			
			nam			
<u> </u>	•	orate@zkslawfirm. be used for future annua		tification)		
••	That, hooress, th			,		
For fu	rther informat	ion concerning this n	natter, pl	ease call:		
	Barbie	Blandina	at (407)		425-7010
	Name of Conti	ect Person	A	rea Code and	Dayti	inte Telephone Number
Enclos	sed is a check	for the following am	ount:			
√ \$52	.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status		05.00 Filing F entified Copy	ce	S113.75 Filing Fee, Certified Copy, and Certificate of Status
STRE	ET ADDRES	SS:		MAILIN	NG A	ADDRESS:
Regist	ration Section	l		Registrat		
	on of Corpora	tions				orporations
	n Building	. 0' 1		P. O. Bo.		
	Executive Con assee, FL 321			ranabas:	see,	FL 32314
1 (11141)	assit, I to Ja.	/ U (

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

	Or.				
FULHA	M TERRACE,	LTD			
Insert name currently o			* <u></u>		
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 8/12/2016, assigned Florida document number A16000000399, adopts the following certificate of amendment to its certificate of limited partnership.					
This amendment is submitted to amend the following	ng:				
A. If amending name, enter the new name of there:	he limited partners	hip or limited liability limite	ed partnership		
New name must be disting	uishable and contain :	in acceptable suffix.			
Acceptable Limited Partnership suffixes: Limited Partn Acceptable Limited Liability Limited Partnership suffix			LLLP. ⇔		
B. If amending mailing address and/or pri- principal office address here:	ncipal office addr	ess, enter new mailing ad	drestand Ex		
New Principal Office Address:			유		
(Must he STREET address)					
			₹ XY C		
New Mailing Address: (May be post office box)			ARY OF STATE CORPORATIO		

C. If amending the registered agent and/or requew registered agent and/or the new registered of			ie name of the		
Name of New Registered Agent:					
New Registered Office Address:	Enter 1	Florida street uddress			
		, Florida			
	City	, Florida Zip 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 I
am familiar with and accept the obligations of my position as 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>Tit</u>	<u>le</u>	Name	Address	Type of Action	
Gi	<u> </u>	Fulham Terrace GP, LLC	1105 Kensington Park Dr. Suite 200 Attamonte Springs, FL 32714	Add Add PRemove	SFERET
G	P	Berkeley Fulham GP, LLC	1105 Kensington Park Dr. Suite 200 Altamonte Springs, Ft. 32714	Add CORPOR Remove A CORPOR	RY OF STATE
	······································			PATIONS Add Remove	ATE
				Add Remove	
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Add Remove	
				Add Remove	
limited p	partnership	artnership or limited flability " status, enter change here: Partnership hereby elects to be			f

(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.

Effective date, if other than the date of filing: Effective date cannot be prior to nor more than 90 days after	the dear this document to that he the Flori to Descriptory of
STATE)	see that the morning of the French Laper with the
Signature(s) of a general partner or all general n	ertners*:
"NOTE: Only one current general partner is required to sign emoving a "limited liability limited partnership" election stat	
when adding or remexing a "limited liability limited pastwers!	
Fulham Terrace SP. LLC	
<u> </u>	
- Ja	
<u>Ry: Jonathan L Wolf. Manager</u>	
Signature(2) of all new or dissociation acheral pa	rtneriski dony:
Berkeley Pulham GP, LLC	Fulham Terrace GP, LLC
Dura 5. Cummins	9,-
By: Terry S. Cummins,	By: Jonathan L. Wolf, Manager
Executive Director of Manager	
Filing Fee: \$52.50 Certified Copy (notional): \$52.50	
Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	

Page 3 of 3