8/26/2021

lorida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H21000320874 3)))



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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: Corporate@zkslawfirm.com

LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION BENSCHLEY MANOR, LTD.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$52.50

Electronic Filing Menu Corporate Filing Menu

Help



COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJ	UBJECT: BENSCHLEY MANOR, LTD. Name of Florida Limited Partnership or Limited Liability Limited Partnership			
The e	nclosed Certificate of Amendme	ent and fee(s) are submitted for filing.		
Please	e return all correspondence conc	erning this matter to:		
···	N. DWAYNE GRAY, JI	R., ESQ.		
	Contact Person			
	ZIMMERMAN KISER SUT	CLIFFE, P.A.		
	Firm/Company			
	315 E. ROBINSON STREE	T, SUITE 600		
	Address			
	ORLANDO, FL 32	2801		
	City, State and Zip Co	<u> </u>		
<u>F</u>	JLagmay@wendovergroup.co -mail address: (to be used for future an	om must report actification)		
••				
For fu	orther information concerning th	is matter, piease call:		
Jan	nie Brown	at (407) 425-7010		
	Name of Contact Person	at (407) 425-7010 Area Code and Daytime Telephone Number		
Enclo	sed is a check for the following	aniount:		
√ \$52	.50 Filing Fee S61.25 Filing F and Certificate of Status			
STRE	EET ADDRESS:	MAILING ADDRESS:		
Registration Section		Registration Section		
Division of Corporations		Division of Corporations		
	n Building	P. O. Box 6327		
	Executive Center Circle	Tallahassee, FL 32314		
Tallah	iassee, FL 32301			

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

BENSCHLE	EY MANOR, L	.TD.
Insert name currently on f	ile with Florida Depa	artment of State
Pursuant to the provisions of section 620.1202, I limited liability limited partnership, whose certif 08/23/2016 assigned Florian and the contract of the cont	icate was filed wi orida document n	th the Florida Department of State on umber <u>A1600000429</u>
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 here:	limited partnershi	ip or limited liability limited partnership
New name must be distinguis	hable and contain an	acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Partners Acceptable Limited Liability Limited Partnership suffixes:		
B. If amending mailing address and/or prine <u>principal office address here</u> :	ipal office addre	ss, enter new mailing address and/or
New Principal Office Address:		G 2
(Must be STREET address)		
New Mailing Address: (May be post office box)		FILED AM
C. If amending the registered agent and/or regis new registered agent and/or the new registered offi	tered office addre	ss on our records, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	r r.	orida street address
	Eniel, L.I	oriaa sireet aaaress
	Cliv	, Florida <u>Zip Code</u>
	Cay	Zilly Civic

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 performence 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:

Title	<u>Name</u>	Address	Type of Action
GP	Jonathan L. Wolf	1105 Kensington Park Dr. Suite 200 Altamonte Springs, FL 32714	Add ☑ Remove
GP	Berkeley Benschley Class B, LLC	1105 Kensington Park Dr. Suite 200 Altamonte Springs, FL 32714	_ Add ☑Remove
			Add Remove
•			Add Remove
			Add Remove
			Add Remove
	ted partnership or limited liability rship" status, enter change here:	· limited partnership is amen	ding its "limited liability

(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.

This Limited Partnership hereby elects to be a "Limited Liability Limited Partnership."

F. If amending any other information, enter ch	ange(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 State.)	r the date this document is filed by the Florida Department of
Signature(s) of a general partner or all general p	partners*:
(*NOTE: Only one current general partner is required to sig removing a "iimited liability limited partnership" election sta when adding or removing a "limited liability limited partners	tement. Chapter 620, F.S., requires all general partners to sign
BERKELEY BENSCHLEY GP, LLC	
By: Berkeley Housing Initiative, Inc., Authorized Men	nber
M. Dingo Ding. Fr.	
BY: N. Dwayne Gray, Jr., Director	
Signature(s) of all new or dissociating general p	artner(s), if any:
Q ₂	Berkeley Benschley Class B, LLC
Jonathon L. Wolf, Individual	
	Jonathan L Wolf, Managing Member
	်င်း ည 🖺
Filing Fee: \$52.50	
Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	