

A16195

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

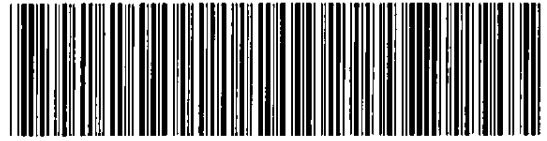
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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K. HUNT

2/21/24

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Consolidated Resources Health Care Fund I, L.P.
Name of Foreign Limited Partnership or Limited Liability Limited Partnership

The enclosed amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Joan E. Thurmond, Assistant Secretary
Contact Person

H.C.F., Inc., Special Corporate General Partner
Firm/Company

3570 Keith Street NW
Address

Cleveland, TN 37312
City, State and Zip Code

carrigan_mcclure@lcca.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joan E. Thurmond at (423) 473-5868
Name of Contact Person Area Code 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

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

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**AMENDMENT TO CERTIFICATE OF AUTHORITY
FOR
FOREIGN LIMITED PARTNERSHIP OR
LIMITED LIABILITY LIMITED PARTNERSHIP**

1. The name of the limited partnership or limited liability limited partnership as it appears on the records of the Florida Department of State is:

Consolidated Resources Health Care Fund I, L.P.

2. Document Number of Foreign Limited Partnership or Limited Liability Limited Partnership: **A16195**

2. The jurisdiction of its formation is: **Georgia**

3. The date the entity was authorized to transact business in Florida is: **January 11, 1984**

4. If the amendment changes the name of the limited partnership or limited liability limited partnership, enter the new name:

*Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.
Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.*

(If name unavailable in Florida, enter alternate name adopted for the purpose of transacting business in Florida.)

5. If the amendment changes the general partner(s), list the name and business address of each general partner:

<u>Name:</u>	<u>Business Address:</u>	
<u>Forrest L. Preston</u>	<u>3570 Keith Street NW</u>	<input type="checkbox"/> Add
	<u>Cleveland, TN 37312</u>	<input checked="" type="checkbox"/> Remove
		<input type="checkbox"/> Change
<u>CRHC, LLC</u>	<u>3570 Keith Street NW</u>	<input checked="" type="checkbox"/> Add
	<u>Cleveland, TN 37312</u>	<input type="checkbox"/> Remove
		<input type="checkbox"/> Change
		<input type="checkbox"/> Add
		<input type="checkbox"/> Remove
		<input type="checkbox"/> Change
		<input type="checkbox"/> Add
		<input type="checkbox"/> Remove
		<input type="checkbox"/> Change

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6. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

7. If the amendment corrects any false statement listed in the application, indicate the statement being corrected and the correction:

Annual reports filed from 2017 through 2023 erroneously stated Forrest L. Preston as a general partner. Effective 1/1/17.

Forrest L. Preston was removed as general partner and CRHC, LLC was admitted as a general partner.

8. If the amendment is to add or delete an election to be a limited liability limited partnership statement, check the appropriate box:

- The entity elects to be a limited liability limited partnership.
- The entity is no longer a limited liability limited partnership.

9. Attached is an original certificate, no more than 90 days olds, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

10. Effective date, if other than the date of filing: January 1, 2017 (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.)

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.

Consolidated Resources Health Care Fund I Limited Partnership

By: CRHC, LLC, corporate general partner

Signature of a general partner:

By: 

Typed or printed name:

Joan E. Thurmond, Assistant Secretary

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

STATE OF GEORGIA

Secretary of State

Corporations Division

313 West Tower

2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, **Brad Raffensperger**, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

CONSOLIDATED RESOURCES HEALTH CARE FUND I, L.P.

a Domestic Limited Partnership

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 26662077
Date Inc/Auth/Filed: 08/23/1995
Jurisdiction : Georgia
Print Date : 02/09/2024
Form Number : 211



Brad Raffensperger

Brad Raffensperger
Secretary of State