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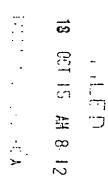
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PICK-UP	☐ WAIT	MAIL
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Special Instructions to	Filing Officer:	
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Company of the Control

COVER LETTER

TO: Registration Division of	Section Corporations		
SUBJECT: 1	the ran Florida ame of Florida Limited Partr	nership or Limited Liability	Limited Partnership
The enclosed Certif	icate of Amendment and	d fee(s) are submitted f	or filing.
Please return all co	respondence concerning	g this matter to:	
Contact Person Rahdert + Mortimer, PLLC Firm/Company			
535	central Au Address	Jenue	
\$4.7	Petersburg, Fl City, State and Zip Code	_ 33701	
Estail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
George K. Ruhdert at (727) 823-4191 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	S113.75 Filing Fee, Certified Copy, and Certificate of Status
STREET ADDRE Registration Section Division of Corpora Clifton Building 2661 Executive Ce Tallahassee, FL 33	n ations nter Circle	MAILING A Registration S Division of C P. O. Box 63 Tallahassee,	Section Corporations 27

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

Lutherun Florid Insert name currently on file	Na.LP with Florida Departi	nent of State
Pursuant to the provisions of section 620.1202, Floridinited liability limited partnership, whose certificate of amendment to its	ite was filed with da document nun	the Florida Department of State on other A1800000428
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin here:	nited partne <u>rship</u>	or limited liability limited partnership
New name must be distinguishab	ole and contain an ac	ceptable suffix.
Acceptable Limited Partnership suffixes: Limited Partnership Acceptable Limited Liability Limited Partnership suffixes: Lin B. If amending mailing address and/or principal principal office address here: New Principal Office Address:	mited Liability Limit	ed Partnership, L.L.L.P. or LLLP.
(Must be STREET address)		
New Mailing Address: (May be post office box)		<u> </u>
C. If amending the registered agent and/or registered new registered agent and/or the new registered office	red office address address here:	on our records, <u>enter the name of the</u>
Name of New Registered Agent:	. <u> </u>	
New Registered Office Address:	Enter Flor	ida street address
		, Florida
_ 	City	Zip Code

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 Age	ent, 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>	Name Lutheran Residen	Address	Type of Action
General Partner	GP, Corp.	550 First Avenue St. Petersburg, FL 33	_So. □ Add 101 21 Remove
General Purtner	Residences Inc.	550 First Avenue St. Petersburg, FL 3	
			Add Remove
			Add To 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.)

F. If amending any other information, enter chan	ge(s) here: (Allach adaitic	onai sneeis, ij necessury.)
Effective date, if other than the date of filing:		
Note: If the date inserted in this block does not meet the applic be listed as the document's effective date on the Department of	able statutory filing requirem State's records.	nents, this date will not
		: 18
Signature(s) of a general partner or all general pa	artners*:	g ·
(*NOTE: Only one current general partner is required to sign removing a "limited liability limited partnership" election state when adding or removing a "limited liability limited partnership".	ment. Chapter 620, F.S., req	ited partnership is adding or puires all general partners to sig
18 Min /an		φ.
Lytheran Residences Inc.		7 2
Signature(s) of all new or dissociating general pa	rtner(s), if any:	
Brush leum	10mm	Mun
Lutheran Residences Inc.	Lutheran F	Residences, Cop. Corp
Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75		