Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : STEARNS WEAVER MILLER WEISSLER ALHADEFF & SITTERSON

Account Number : I20060000135

: (305)789-3200 Fax Number : (305)789-4137

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

email	Address:	
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LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION QUAIL ROOST TRANSIT VILLAGE IV, LTD.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$105.00

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CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP

QUAIL ROOST TRANSIT VILLAGE IV, LTD.

Insert name currently on file	e with Florida Department of State
Pursuant to the provisions of section 620.1202, FI limited liability limited partnership, whose certific October 11, 2021 adopts the following certificate of amendment to i	cate was filed with the Florida Department of State on rida document number A19000000442
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the linere:	mited partnership or limited liability limited partnership
	able and contain an acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Partnershi Acceptable Limited Liability Limited Partnership suffixes: L	ip, Limited, L.P., LP, or Ltd. Imited Liability Limited Partnership, L.L.L.P, or LLLP.
B. If amending mailing address and/or princip principal office address here:	al office address, enter new mailing address and/or
New Principal Office Address:	
(Must be STREET address)	
New Mailing Address: (httuy he post office box)	
C. If amending the registered agent and/or registered registered agent and/or the new registered office add	d office address on our records, enter the name of the new ress here:
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City Zin Code

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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 + am familiar with and accept the obligations of my position as registered agent.

If Changing Registored Agent, Signature of Now 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	Name	Address	Type of Action
	HEF-QUAIL ROOST IV, INC.	437 SW 4TH AVENUE FT. LAUDERDALE, FL 33315	_ □ Add _ ■ Remove
			_ □ Add _ □ Remove
			□ Add □ Romove
			_ □ 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 info	rmation, enter cha	ange(s) here: (Attach additional sheets, If necessary.)
		DCT
		
Effective date, if other than the da (Effective date cannot be prior to nor mo	to of filing;	the date this document is filed by the Florida Department of
State.) Note: If the date inserted in this block do be listed as the document's offective date		icable statutory filing requirements, this date will not of State's records.
Signature(a) of a general partne	r or all general n	nartners†:
	nership" election stat	n this document unless the limited partnership is adding or tement. Chapter 620, F.S., requires all general partners to sign hip" election statement.)
Kenneth Naylor, VP of APCHD MM II INC., M	anager of GP	
		•
Signature(s) of all new or dissoc	inting general pa	irtner(s), if any:
		
Filing Fee:	\$52.50 \$52.50	
Certified Copy (optional): Certificate of Status (optional):	\$8.75	

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F. If amending any other inform	nation, enter cha:	nge(s) here: (Attach additional sheets, if necessar)
- · · · · · · · · · · · · · · · · · · ·	, , , , , , , , , , , , , , , , , , , ,	99
		
	<u>. </u>	
		
	of filing: than 90 days after	the date this document is flied by the Florida Department of
State.) Note: If the data inserted in this block does	not meet the applic	pable statutory filing requirements, this date will not
be listed as the document's effective date or		
Signature(s) of a general partner of	or all general n	artnors*:
		
removing a "limited liability limited partner	rahip" election atate	this document untess the limited partnership is adding or oment. Chapter 620, F.S., requires all general partners to sign
when adding or removing a "limited liability	y Bmited partnersh	ip" election statement.)
	<u></u>	
		
Signature(s) of all new or dissociat	<u>ting general pa</u>	r(ner(s), if any:
A MESON		
HEF-QUALL ROOST I	I TAUC	
		
<u> </u>		
	\$52,50	
	\$52.50 \$9.76	
'Certificate of Status (optional):	58.75	