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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: The Villa S. LTO Name of Florida Limited Partnership or Limited Liability Limited Partnership
Name of Florida Limited Partnership or Limited Liability Limited Partnership
The enclosed Certificate of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
Mike Seligman Contact Person Dinensian One Maungement Firm/Company 7865 Southside Blud. Address
Contact Person
Dinensian One Maurogenest
Firm/Company
7865 Southside Blod.
Sachsonville, FL 32256 City, State and Zip Code
City, State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Mike Solisman at (904) 642-1759 - Ext. 102 Name of Contact Person Area Code and Daytime Telephone Number
Name of Contact Person Area Code and Daytime Telephone Number
Enclosed is a check for the following amount:
\$61.25 Filing Fee and Certificate of Status \$105.00 Filing Fee \$113.75 Filing Fee, Certified Copy, and Certificate of Status
STREET ADDRESS: MAILING ADDRESS:
Registration Section Registration Section
Division of Corporations Division of Corporations
Clifton Building P. O. Box 6327
2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

OF			
The Villas, LTD			
Insert name currently on file with Florida Department of State			
Pursuant to the provisions of section 620.1202. Florida Statutes, this Florida limited limited liability limited partnership, whose certificate was filed with the Florida Depoint 1985, assigned Florida document number A 1 963 adopts the following certificate of amendment to its certificate of limited partnerships	partment L O	hip or of Sta	te on
This amendment is submitted to amend the following:	r.		
A. If amending name, enter the new name of the limited partnership or limited liabili	tu limitad	l nantn	avahin
here:	ty minted	<u>(1)</u> (2) (3) (3)	
New name must be distinguishable and contain an acceptable suffix.		1	
Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes. Limited Liability Limited Partnership, L.1	LLP, or L	LLP	:
B. If amending mailing address and/or principal office address, enter new main principal office address here:	ling add	ress a	nd/or
New Principal Office Address: (Must be STREET address)	· - ·	· 	
New Mailing Address: (May be post office box)			
C. If amending the registered agent and/or registered office address on our records, new registered agent and/or the new registered office address here:	enter the	<u>name</u>	of the
Name of New Registered Agent:			
New Registered Office Address:			
Enter Florida street address			
Fiorida >			

City

Zip Code

I hereby accept to comply with the p	provisions of all statutes rela	d agent and agree to act in this c	performance of my duties, and 1
		If Changing Registered Agen	Signature of New Registered Agent
	the general partner(s), <u>ente</u> <u>d from our records</u> :	r the name and business addres	s of each general partner being
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove.
			Add Remove
			Remove
	l partnership or limited li hip" status, enter change h	ability limited partnership is a	
This Limit	ed Partnership hereby elects	s to be a "Limited Liability Limit	ted Partnership."
This Limit	ed Partnership hereby remo	ves its "Limited Liability Limite	d Partnership" status.
(NOTE: If adding a	or removing" limited liability lin	nited partnership" status, all general	partners must sign this amendment.)

F. If amending any other infor	rmation, enter ch	ange(s) here	e: (Attach addi	itional sheets, ij	necessary.)	
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Withdrawing Entering New	Limited	Partne	- Poo	le Man	agement (<u>s</u> mp
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Effective date, if other than the dat (Effective date cannot be prior to nor mor State.)	te of filing: re than 90 days afte	er the date thi	s document is fil	ed by the Florid	a Department (of.
		4 4				
Signature(s) of a general partner	r or all general	partners*:	•			
(*NOTE: Only one current general partr removing a "limited liability limited partr when adding or removing a "limited liabi	nership" election sta	atement. Cha	pter 620, F.S., re	mited partnershi equires all gener	p is adding or al partners to s	ign
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Saufo. L. Helyn					ب _ا ست ا	
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Signature(s) of all new or dissoci	ating general p	<u>artner(s),</u>	if any:			
						
						
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Eiling Foot	¢52 50					
Filing Fee: Certified Copy (optional):	\$52.50 \$52.50					
Certificate of Status (optional):	\$8.75					

SIXTH AMENDMENT TO THE LIMITED PARTNERSHIP AGREEMENT AND CERTIFICATE OF THE VILLAS, LTD

The sixth amendment to the limited partnership agreement and certificate of The Villas, Ltd. is executed this $\frac{\sqrt{y_2}}{\sqrt{y_2}}$ day of January, 2013 by the following:

GENERAL PARTNER

Sanford L. Seligman 7865 Southside Boulevard Jacksonville, FL 32256

LIMITED PARTNERS

Rogers B. Holmes 4401 Lakeside Drive, Unit 702 Jacksonville. FL 32210

Holmes Lumber Company 8323 Ramona Boulevard Jacksonville, FL 32221

Gary D. Silverfield
10175 Fortune Parkway, Suite 1005
Jacksonville, FL 32256

WITHDRAWING LIMITED PARTNER

Holmes Lumber Company 8323 Ramona Boulevard Jacksonville, FL 32221

ENTERING LIMITED PARNTER

Poole Management Company 8323 Ramona Boulevard Jacksonville, FL 32221

2013 KAS -4 KESTI - SE

ARTICLE 1.3 - Principal place of business shall be amended to read:

The principal place of business of the partnership shall be 7865 Southside Boulevard, Jacksonville, Florida 32256.

Article 5.2 - Initial Capital Contributions to the partnership spell be in the amount of \$65,253 contributed as follows:

General Partner: Sanford L Seligman \$3,263

Limited Partners: Rogers B. Holmes \$37,742
Poole Management Company \$15,840

Gary D. Silverfield \$8,419

ARTICLE 6.1 - Capital Interest and Capital Accounts shall be amended to reflect: The capital interests of the partners shall be as follows:

General Partner: Sanford L. Seligman 5.0%

Limited Partners: Rogers B. Holmes 57.83%

Poole Management Company 24.27% Gary D. Silverfield 12.90% IN WITNESS HEREOF, the Partners have signed and sworn to this Agreement and Certificate of Limited Partnership's Sixth Amendment. Signed in my presence as witness: As to the General Partner: The Villas, Ltd. State of General Partner County of Sworn to and subscribed before me this L day of Lum 2013, by Sanford L. Seligman who is personally known to me or has produced duras las identification. As to the Limited Partner: Signed in my presence as witness: Rogers B. Holmes Limited Partner State of County of Sworn to and subscribed before me this <u>6</u> **BEVERLY GRACEY** day of tebruary, 2013, by Rogers B. Commission # EE 088383 Holmes who is personally known to me or has Expires August 27, 2015 Bonded Thru Troy Fain Insurance 500-385-7019 produced as identification. Signed in my presence as witness: As to the Limited Partner: Mouna mur BY: Gary D. Silverfield **Limited Partner** State of FUN County of NA Sworn to and subscribed before me this _day of WYWW 2013, by Gary D. MELISSA K MYERS Notary Public, State of Florida My Comm. Expires February 23, 2014 Silverfield who is personally known to me or Commission No DD 955040 as identification. has produced ___

MUUMAVM

Notary Signature

•	• •
Signed in my presence as witness:	As to the Limited Partner:
Printed Name: +Beller ly Covaccy State of Horide County of Dural	BY: Lockwood/Holmes for Holmes Lumber Company Limited Partner
Sworn to and subscribed before me this day of the brunen, 2013, by Lockwood Holmes who is personally known to me or has produced as identification. Notary Signature	BEVERLY GRACEY Commission # EE 088383 Expires August 27, 2015 Bonded Thru Troy Fam Insurance 800-385-7019
Signed in my presence as witness: Printed Name: Beverly Graces State of Lorida County of Dwal	BY: Dockwood Holmes for Poole Management Company Limited Partner
Sworn to and subscribed before me this	BEVERLY GRACEY Commission # EE 088383 Expires August 27, 2015 60040 Tru Tru Familian report 200 285 700

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