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To:

Division of Corporations Fax Number : (\$50)617-6383

From

Account Name BILZIN SUMBERG BAENA PRICE & ANELROD LLP

Account Number: 075350000132 Phone : (305)374-7580 Fax Number : (786)646-6129

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

vvalladates(ã)bilzin.com

35 LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION CARRFOUR RESIDENTIAL, LLLP

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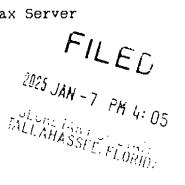
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CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF



Carrfour Residential, LLLP	
Insert name currently or	on file with Florida Department of State
limited liability limited partnership, whose cert	2, Florida Statutes, this Florida limited partnership or rtificate was filed with the Florida Department of State on Florida document number A24000000331
adopts the following certificate of amendment	to its certificate of limited partnership.
This amendment is submitted to amend the following	ng:
A. If amending name, enter the new name of the here:	he limited partnership or limited liability limited partnership
New name must be distingu	uishable and contain an acceptable suffix.
Acceptable Limited Partnership suffices: Limited Partne Acceptable Limited Liability Limited Partnership suffice	nership, Limited, L.P., LP, or Ltd. les: Limited Liability Limited Parmership, L.L.L.P. or LLLP.
B. If amending mailing address and/or principal office address here:	ncipal office address, enter new mailing address and/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 regist registered agent and/or the new registered office	stered office address on our records, <u>enter the name of the new</u> address here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street aidress
	, Florida City Zip 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 (61); 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 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:

<u>Title</u>	<u>Name</u>	Address	Type of Action
	C4 Carrfour Residential, LLC	1398 SW 1st Street, 12th Floor Miami, FL 33135	_ □ Add ■ Remove
	Carriour Supportive Housing, Inc.	1398 SW 1st Street, 12th Floor Miami, FL 33135	_ ■ Add _ □ Remove
	<u></u>		
			_ □ 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.)

(((11250000078623)))

F. If amending any other information, enter cha	ange(s) here: (Attach additional sheets, if necessary.)
	77. 3
•	\$55. P.
Effective date, if other than the date of filing:	the date this document is filed by the Florida Department of
State.) Note: If the date inserted in this block does not meet the appli- be listed as the document's effective date on the Department of	
Signature(s) of a general partner or all general p	artners*:
(*NOTE: Only one current general partner is required to sign removing a "limited liability limited partnership" election stat when adding or removing a "limited liability limited partnership."	ement. Chapter 620, F.S., requires all general partners to sign
Carriour Supportive Housing, Inc.	
/s/ Stephanie Berman	
Stephanie Berman, its President	
Signature (a) of all now on disaggisting general pu	
Signature(s) of all new or dissociating general pa	rtner(s), if any.
Carrfour Supportive Housing, Inc.	C4 Carriour Residential, LLC
/s/ Stephanic Berman	/s/ Stephame Berman
Stephanie Berman, its President	Stephanie Berman, its Manager
Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	