

A 24590

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

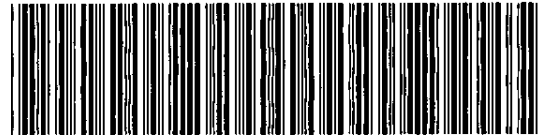
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED
DEPARTMENT OF
15 JUN 17 PM 4:27
TO CLERK OF
SUFFICIENT FILING

FILED
2015 JUN 17 AM 8:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. O. 18 2015

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 672616 10463A

AUTHORIZATION :

COST LIMIT : \$52.50

ORDER DATE : June 17, 2015

ORDER TIME : 12:37 PM

ORDER NO. : 672616-015

CUSTOMER NO: 10463A

FOREIGN FILINGS

NAME: ARBERN INVESTORS IV, LTD.

☐ CORPORATE
☒ LIMITED PARTNERSHIP
☐ LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ARBERN INVESTORS IV, 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:

RALPH REICHENBAUM

Contact Person

ARBERN INVESTORS III, L.P.

Firm/Company

310 YAMATO ROAD, SUITE 3101

Address

BOCA RATON, FLORIDA 33431

City, State and Zip Code

rr@stoltzcompanies.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ralph Reichenbaum

Name of Contact Person

at (561)

998-3311
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 ☐ \$113.75 Filing Fee, Certified Copy, and Certificate of Status

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

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

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2015 JUN 17 AM 8:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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:

ARBERN INVESTORS IV, LTD.

2. The jurisdiction of its formation is: DELAWARE

3. The date the entity was authorized to transact business in Florida is: 05/29/1987

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

ARBERN INVESTORS IV, L.P.

Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., L.P., or Ltd.

Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P., or L.L.L.P.

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

Name:

Business Address:

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:

AT THE TIME THE LIMITED PARTNERSHIP WAS FILED WITH FLORIDA
THE USE OF "L.P." WAS PROHIBITED.

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

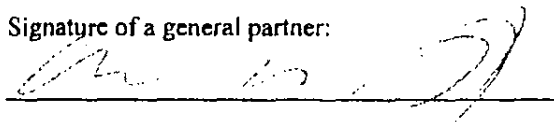
☐ The entity elects to be a limited liability limited partnership.

☐ 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: _____
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State)

Signature of a general partner:



Typed or printed name:
ARBORN BUILDING COMPANY, INC., General Partner

By: MORRIS L. STOLTZ, II, President

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

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TALLAHASSEE, FLORIDA

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ARBORN INVESTORS IV, L.P." IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINTH DAY OF JUNE, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ARBORN INVESTORS IV, L.P." WAS FORMED ON THE FIRST DAY OF MAY, A.D. 1987.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

2125114 8300

150900085

You may verify this certificate online
at corp.delaware.gov/authver.shtml




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 2450444

DATE: 06-09-15