

A26270

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H16000104817 3)))



H160001048173ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 205-8842  
Fax Number : (850) 878-5368

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

Email Address: \_\_\_\_\_

LP/LLP AMENDMENT/RESTATEMENT/CORRECTION  
PORT CHARLOTTE-JCP ASSOCIATES, LTD.

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$52.50

FILED  
2016 APR 27 PM 3:41  
TALLAHASSEE, FLORIDA  
2016 APR 27 PM 1:59  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

Electronic Filing Menu

Corporate Filing Menu

Help

APR 28 2016  
J. BRUCE

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Port Charlotte - JCP Associates, Ltd.  
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:

Janelle Lopez  
Contact Person  
WP Glimcher Inc.  
Firm/Company  
180 East Broad Street  
Address  
Columbus, OH 43215  
City, State and Zip Code  
janelle.lopez@wpglimcher.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Janelle Lopez at ( 614 ) 887-5676  
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    ☐ \$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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2016 APR 27 P 1:59

FILED

**CERTIFICATE OF AMENDMENT  
TO  
CERTIFICATE OF LIMITED PARTNERSHIP  
OF**

Port Charlotte - JCP Associates, Ltd.

Insert name currently on file with Florida Department of State

Pursuant to the provisions of section 620.1202, Florida Statutes, this Florida limited partnership or limited liability limited partnership, whose certificate was filed with the Florida Department of State on 04/11/1988, assigned Florida document number A26290, adopts the following certificate of amendment to its certificate of limited partnership.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited partnership or limited liability limited partnership here:**

New name must be distinguishable and contain an acceptable suffix.

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

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

**B. If amending mailing address and/or principal office address, enter new mailing address and/or principal office address here:**

<u>New Principal Office Address:</u> (Must be STREET address)	<u>c/o WP Glimcher Inc.</u> <u>180 East Broad Street</u> <u>Columbus, OH 43215</u>
--	--

<u>New Mailing Address:</u> (May be post office box)	<u>c/o WP Glimcher Inc.</u> <u>180 East Broad Street</u> <u>Columbus, OH 43215</u>
---	--

**C. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

City

Zip Code

FILED  
16 APR 27 P 1:59  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

**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 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>	<u>Address</u>	<u>Type of Action</u>
GP	Simon Property Group, LP	225 W. Washington Street Indianapolis, IN 46204	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
GP	Washington Prime Group, LP	180 East Broad Street Columbus, OH 43215	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> 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.)**

FILED  
 APR 27 2016  
 11:19 AM  
 CLERK OF COURT  
 ALABAMA  
 JUDGE

**F. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

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(s) of a general partner or all general partners\*:**

(\*NOTE: Only one current general partner is required to sign this document unless the limited partnership is adding or removing a "limited liability limited partnership" election statement. Chapter 620, F.S., requires all general partners to sign when adding or removing a "limited liability limited partnership" election statement.)

\_\_\_\_\_  
\*\* See attached signature block

**Signature(s) of all new or dissociating general partner(s), if any:**

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

**FILED**  
2016 APR 27 PM 1:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA


4/27/2016 3:23:32 PM From: To: 8506176383( 6/6 )

**\*\* Attached Signature Block**

PORT CHARLOTTE-JCP ASSOCIATES, LTD., a Florida limited partnership

By: WASHINGTON PRIME GROUP, L.P., an Indiana limited partnership, its  
general partner

By: WP GLIMCHER INC., an Indiana corporation, its general partner

By:   
Gregory A. Gorospe  
Executive Vice President, General Counsel & Secretary