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(Req	uestor's Name)	
(Add	ress)	
bbA)	ress)	
(City)	/State/Zip/Phone	÷#)
PICK-UP	MAIT	MAIL
(Busi	iness Entity Nam	ne)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	
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TALLAHASSEE, FLORID

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FILED

COVER LETTER

Division of	Corporations						
SUBJECT: N	LAKE HE					ship	
The enclosed Certif	icate of Amendment a	and fee(s)	are sub	mitted	for filing.		
Please return all con	respondence concerni	ing this n	natter to:	:			
	l. Rolando Sanchez			·			
	Contact Person						
Lake	Helen Court RRH,	Ltd.				30	20
	Firm/Company						
2	4207 NW 110th Ave) .				芸	FEB
Address						SS	25
••	. =					E Q	
	chua, FL 32615-78	29		_			PH
	City, State and Zip Code)A	<u>.</u>
	anningDevInc@wind		•	_			7
E-mail address: (t	o be used for future annua	l r ep ort not	ification)				
For further information	tion concerning this m	natter, ple	ase call:	:			
J. Rolar	ido Sanchez	at (386)	454-146	0	
Name of Cont	act Person			and Day	time Telephone N	······································	
Enclosed is a check	for the following amo	ount:					
\$52.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status		5.00 Filin ertified Co		\$113.75 Fili Certified Copy Certificate of S	, and	
STREET ADDRES	SS:		MAII	LING	ADDRESS:		
Registration Section			Regis	tration	Section		
Division of Corpora	ations				Corporations		
Clifton Building				Box 63			
2661 Executive Cer			Tallah	iassee,	FL 32314		
Tallahassee, FL 32	301						

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

LAKE HELEN COURT RRH, LTD.

Insert name currently on file with Florida Department of State

Pursuant to the provisions of section 620.13 limited liability limited partnership, whose December 10, 1993, assign	certific	cate was filed	with the Florida l	Department of S	tate on
adopts the following certificate of amendm					•
This amendment is submitted to amend the following	owing:				
A. If amending name, enter the new name of here:	of the li	mited partner	ship or limited lia	bility limited par	tnership
	ŀ	N/A		Jan. 1994 - 1994	-
New name must be dis	tinguisha	able and contain	an acceptable suffix.	- 1	
Acceptable Limited Partnership suffixes: Limited Partnership Suffixes Limited Liability Limited Partnership suffixed Partnership Suffix	ıffixes: L	imited Liability	Limited Partnership,	L.L.L.P. or L.B.P.	
B. If amending mailing address and/or principal office address here:	princip	oal office add	ress, <u>enter new r</u>	nailing address	and/or
New Principal Office Addres	<u>is:</u>	N/A			٠ ٠٠٠٠
(Must be STREET address)					
New Mailing Address:					
(May be post office box)					
		**************************************	<u> </u>	<u> </u>	
C. If amending the registered agent and/or new registered agent and/or the new registered				ds, <u>enter the nan</u>	e of the
Name of New Registered Agent:	N/A			· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:					
		Enter	Florida street addr	ess	
			, Flo ri da		
t.		City		Zip Code	

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.

amending <u>or remove</u>	the general partner(s), enter the d from our records:	name and business address of	f each general partner
<u> Fitle</u>	<u>Name</u>	Address	Type of Action
GP	Wayne A. Chapman	(Deceased)	Add Remove
	Anna Mae Chapman	1611 SW Vanguard St. Oak Harbor, WA 98277	B 25
	·		Add Remove
			Add Remove .

(NOTE: If adding or removing" limited liability limited partnership" status, all general partners must sign this amendment.)

This Limited Partnership hereby removes its ``Limited Liability Limited Partnership'' status.

F. If amending any other information	n, enter change(s) here: (Attach additional sheets, if necessary.)
	· · · · · · · · · · · · · · · · · · ·
	· · · · · · · · · · · · · · · · · · ·
	2010 TALI
	AR B I
Effective date, if other than the date of fi	ling:
(Effective date cannot be prior to nor more than State.)	90 days after the date this document is filed by the Florida Departmen of FLORIDE CORNER TO THE STATE OF THE
Signature(s) of a general partner or al	l general partners*:
(*NOTE: Only one current general partner is recremoving a "limited liability limited partnership" when adding or removing a "limited liability limited liabi	quired to sign this document unless the limited partnership is adding or election statement. Chapter 620, F.S., requires all general partners to sign ited partnership" election statement.)
	_ J.ROOJ .
	J. Rolando Sanchez, General Partner
	2-6-10
	
Signature(s) of all new or dissociating	general partner(s), if any: Anna Med Chappnan
	Anna Mae Chapman, General Partner
	
	
Filing Fee: \$52.5 Certified Copy (optional): \$52.5 Certificate of Status (optional): \$8.7	50