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SECRETARY OF STATISHED OF CORPORATIONS

COVER LETTER

Division of Corporations	
SUBJECT: LAKE	VIEW GROVE, LTD.
	rtnership or Limited Liability Limited Partnership
The enclosed Certificate of Amendment a	nd fee(s) are submitted for filing.
Please return all correspondence concerni	ng this matter to:
William K. Budd	
Contact Person	
Raymond James Tax Credit Fu	ınds, Inc.
Firm/Company	
880 Carillon Parkway, Dept.	05485
Address	
Saint Petersburg, FL 337	716
City, State and Zip Code	
bill.budd@raymondjames	
E-mail address: (to be used for future annual	report notification)
	,
For further information concerning this ma	atter, please call:
William K. Budd	at (<u>727</u>) <u>567-4820</u>
Name of Contact Person	Area Code and Daytime Telephone Number
Enclosed is a check for the following amo	unt:
\$52.50 Filing Fee \$61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fee, and Certified Copy Certificate of Status
STREET ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations Clifton Building	Division of Corporations P. O. Box 6327
2661 Executive Center Circle	Tallahassee, FL 32314
Tallahaceae El 32301	

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

		V GROVE, LTD.	nt of State			
Pursuant to the provisions of section 620 limited liability limited partnership, whose March 23, 1994, assign adopts the following certificate of amend	se certif gned Flo	icate was filed with thorida document number	e Florida D er <u>A</u>	epartment 94000000	of Sta	
This amendment is submitted to amend the fo		ns confined of mine	ed partifers	mp.		
•						
A. If amending name, enter the new name here:	of the	limited partnership or	<u>limited liab</u>	ility limited	<u>partn</u>	<u>iership</u>
New name must be o	listinguis	hable and contain an accep	otable suffix.			
Acceptable Limited Partnership suffixes: Limited Acceptable Limited Liability Limited Partnership				L.L.L.P. or Li	LLP.	
B. If amending mailing address and/or principal office address here:	r princi	pal office address, <u>er</u>	iter new m	ailing add		<u>nd/or</u>
					TAM OT	VISIC
New Principal Office Addr (Must be STREET address)	ess:	c/o Value Partners 880 Carillon Parky				発送
(**************************************		St. Petersburg, FL			-15	
New Mailing Address: (May be post office box)		c/o Value Partners 880 Carillon Parky St. Petersburg. FL	vay, Dept.		PM 12: 4.1	THE SEATES
C. If amending the registered agent and/onew registered agent and/or the new registered			our record	s, <u>enter the</u>	name	of the
Name of New Registered Agent:	Rayn	nond James Tax Cr	edit Funds	, Inc.		
New Registered Office Address:	880 Carillon Parkway, Dept. 05485 Enter Florida street address					
		St. Petersburg		33716		
		City	, Florida _	Zip Code	_	

New Registered Agent's Signature, if changing Registered Agent:

	Raymond J	If Changing Registered Agent, Si James Tax Credit Funds, Inc.	Ignature of New Registered Agent By: Ronald M. Diner, Preside
	the general partner(s), <u>enter the</u> <u>l from our records</u> :	name and business address of	of each general partner being
<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>GP</u>	William R. Gunby, Jr.	1505 Bayshore Blvd. Tampa, FL 33606	Add Remove
<u>GP</u>	No General Partner	See FL. Stat. Section 620.1803(3)(b)(1)	Add Remove
			Add Remove
 .			Add Remove
			Add Remove
			AddRemove
	l partnership or limited liabili hip" status, enter change here:		ending its "limited liabilit

F. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
The Partnership has filed a Certificate of Dissolution. There is no general partner of the
Partnership [FL. Stat. 620.1803(3)(b)(1)]. The entity appointed to wind up the affairs of
the Partnership pursuant to FL. Stat. 620.1803(3) is Value Partners- Florida L.L.C. having a
street and mailing address at c/o Raymond James Tax Credit Funds, Inc., 880 Carillon Pkwy.
Dept. 05485, St. Petersburg, FL 33716. 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.)
Value Partners- Florida L.L.C. per FL. Stat. § 620.1803(3 By: Value Partners, Inc., its sole member By: Ronala M. Diner, President
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