

A94000001711

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

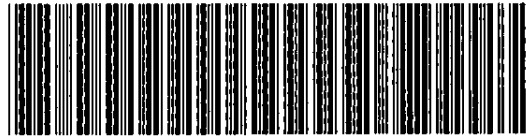
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2012 FEB 20 PM 4:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

FEB 21 2012

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HTV ASSOCIATES LIMITED PARTNERSHIP
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:

Jeffrey C. Steinert
Contact Person
Pepple Cantu Schmidt PLLC
Firm/Company
1501 Western Avenue, Suite 600
Address
Seattle, WA 98101
City, State and Zip Code
jsteinert@pcslegal.com
E-mail address: (to be used for future annual report notification)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Jeffrey C. Steinert at (206) 625-9984
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 2, 2012

JEFFREY C. STEINERT
PEOPLE CANTU SCHMIDT PLLC
1501 WESTERN AVENUE, SUITE 600
SEATTLE, WA 98101

SUBJECT: HTV ASSOCIATES LIMITED PARTNERSHIP
Ref. Number: A94000001711

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for HTV ASSOCIATES LIMITED PARTNERSHIP and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan
Regulatory Specialist II

Letter Number: 512A00003830

CERTIFICATE OF AMENDMENT
TO
CERTIFICATE OF LIMITED PARTNERSHIP
OF

HTV ASSOCIATES LIMITED PARTNERSHIP

Insert name currently on file with Florida Department of State

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 December 14, 1994, assigned Florida document number A94000001711, 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 LLLP.

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

New Principal Office Address:

(Must be STREET address)

Southport Financial Services, Inc.

2430 Estancia Boulevard, Suite 101

Clearwater, FL 33761

New Mailing Address:

(May be post office box)

Southport Financial Services, Inc.

2430 Estancia Boulevard, Suite 101

Clearwater, FL 33761

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:

David O. Cantu

New Registered Office Address:

2430 Estancia Boulevard, Suite 114

Enter Florida street address

Clearwater

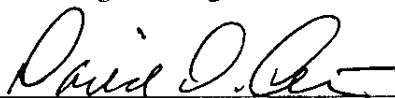
, Florida 33761

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.



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>
	Hilltop Partners, Limited Partnership	801 International Drive, Suite 110	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
	SWP Hilltop Village GP LLC	Linthicum, MD 21090	
	#L1000032233	2430 Estancia Boulevard, Suite 101	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
		Clearwater, FL 33761	
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
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			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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TAX & REVENUE
DEPARTMENT

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.)

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.)

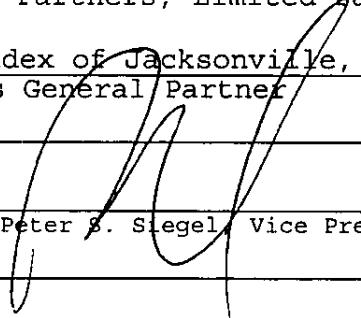
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TALLAHASSEE, FLORIDA

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

Hilltop Partners, Limited Partnership SWP Hilltop Village GP LLC

By: Landex of Jacksonville, Inc.,
its General Partner

By: 
Stephen W. Page, Manager

By: 
Peter S. Siegel, Vice President

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