

Apr. 23.

A9400001743

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.

((H15000099479 3)))



H150000994793ABCB

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 : ZIMMERMAN, KISER, & SUTCLIFFE, P.A.
Account Number : I19990000006
Phone : (407)425-7010
Fax Number : (407)425-2747

FILED
2015 APR 23 AM 8:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

****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/LLLP AMENDMENT/RESTATEMENT/CORRECTION
GROVE POINTE LIMITED PARTNERSHIP**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$52.50

Electronic Filing Menu

Corporate Filing Menu

Help

Apr. 23. 2015 11:09AM ZKS. 407-418-1251

NE 686 E D. 2/4
(((15000099479 3)))

2015 APR 23 AM 8:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

GROVE POINTE LIMITED PARTNERSHIP

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 12/15/1994, assigned Florida document number A94000001743 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 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)

New Mailing Address:
(May be post office box)

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

((H15000099479 3)))

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	Cornerston Grove Pointe, Ltd.	2100 Hollywood Boulevard Hollywood, FL 33020	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
GP	The Richmond Group of Florida, Inc.	2100 Hollywood Boulevard Hollywood, FL 33020	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
GP	Cornerstone Grove Pointe, Ltd.	2100 Hollywood Boulevard Hollywood, FL 33020	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
GP	The Richman Group of Florida, Inc.	2100 Hollywood Boulevard Hollywood, FL 33020	<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

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.)

((H15000099479 3)))

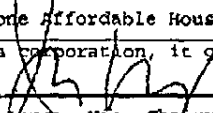
((H15000099479 3)))

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

Effective date, if other than the date of filing: Upon 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.)

Cornerstone Affordable Housing, Inc.
a Florida corporation, its general partner
By: 
Jorge Lopez, Vice-Chairman

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2015 APR 23 AM 8:36

FILED

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

((H15000099479 3)))