## PALOXXXXXXXXX

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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## FLORIDA DEPARTMENT OF STATE Division of Corporations

December 9, 2015

INTERVEST AT WATER'S EDGE, LTD. J. ANDREW HAGAN 2379 BEVILLE ROAD DAYTONA BEACH, FL 32119

SUBJECT: INTERVEST AT WATER'S EDGE, LTD.

Ref. Number: A9600000800

We have received your document for INTERVEST AT WATER'S EDGE, LTD. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a GENERAL PARTNERSHIP, but your entity is a LIMITED PARTNERSHIP - PER OUR PHONE CONVERSATION YOU NEED AN LP AMENDMENTFORM. Please complete and return the enclosed blank form(s).

There is a balance due of \$27.50.

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) 245-6051.

Stacey M Mason Regulatory Specialist II

Letter Number: 215A00025814

## **COVER LETTER**

Division of Corpor			
SUBJECT:	Interves	t at Water's E	dge, Ltd.
			Liability Limited Partnership
The enclosed Certificate of	of Amendment ar	nd fee(s) are subr	nitted for filing.
Please return all correspor	ndence concernir	g this matter to:	
· ·	ri Hansen		_
Со	ntact Person		
Fir	m/Company		_
2379	Beville Road		_
	Address		
Daytona	Beach, Fl 321	19	
City, St	ate and Zip Code		_
	@icihomes.cor		_
E-mail address: (to be use	ed for future annual	report notification)	
For further information co	oncerning this ma	atter, please call:	
Teri Hans	en	_at ( <u>386</u>	) 236-4113
Name of Contact Pers	son	Area Code a	nd Daytime Telephone Number
Enclosed is a check for the	e following amo	unt:	
	61.25 Filing Fee Certificate of us	\$105.00 Filing and Certified Co	
STREET ADDRESS:			ING ADDRESS:
Registration Section			ration Section
Division of Corporations			on of Corporations Box 6327
Clifton Building 2661 Executive Center Ci	rcle		assee, FL 32314
Tallahassee FL 32301	icic	ianan	ussee, i L 52517

## CERTIFICATE OF AMENDMENT CERTIFICATE OF LIMITED PARTNERSHIP OF Intervest at Water's Edge, 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 04/26/1996 \_\_\_\_\_, assigned Florida document number \_\_\_\_\_\_ A96000000800 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: Intervest at Water's Edge, LLLP 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) **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 Zip Code City

I hereby accep comply with th	t the appointment as regis e provisions of all statutes	f changing Registered Agent:  stered agent and agree to act in this capa is relative to the proper and complete perfons of my position as registered agent.  If Changing Registered Agent, Sig	formalice of my dutie , and I
	g the general partner(s), ved from our records:	enter the name and business address of	each general partner being
<u>Title</u>	Name	<u>Address</u>	Type of Action
			Add Remove Add
			Remove
			Add Remove
			Add Remove
	<u> </u>		Add Remove
	ted partnership or limit ership" status, enter cha	ted liability limited partnership is amo	ending its "limited liability
	•	elects to be a "Limited Liability Limited	Partnership."
	•	removes its "Limited Liability Limited P	•

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

Effective date, if other than the dat (Effective date cannot be prior to nor mor State.)		he date this document is	s filed by the Florida Depart
Signature(s) of a general partner	r or all general pa	artners*:	
(*NOTE: Only one current general partr removing a "limited liability limited partr when adding or removing a "limited liabi	nership" election state	ment. Chapter 620, F.S.	
Morteza Hosseini-Kargar Manag	<del>or</del>		
Morteza Hosseini-Kargar, Manag ICI Homes Residential Holding, Morteza Hosseini-Kargar, Presid Intervest Construction, Inc.		<del>.</del>	
Mortega Hosserni Kaygar, Cho MHK of Volusia County, Inc			
Signature(s) of all new or dissoci	iating general pa	tner(s), if any:	
	-		
,			
	<del></del>		
Filing Fee:	\$52.50		
f antitiod f any (antional)	\$52.50 60.75		215
Certified Copy (optional): Certificate of Status (optional):	\$8.75		S DEC