

7/18/2017

Division of Corporations

### Florida Department of State

**Division of Corporations** Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (512)418-6949 Fax Number : (954)208-0845 Fax Number : (954)208-0845

\*\*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 LAKE WESTON APARTMENTS (ORLANDO) LIMITED PARTNERSHIP

Certificate of Status	0
Certified Copy	0
Page Count	07
Estimated Charge	\$52.50

Electronic Filing Menu

Corporate Filing Menu

Help

S. WARREN

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#### COVER LETTER

TO:	Registration Division o	on Section f Corporations				
SUBJ	ECT:	Lake Weston Apa				
		Name of Florida Limited Par	tnership o	r Limited	Liabilit	y Limited Partnership
The er	nclosed Cer	tificate of Amendment ar	nd fee(s)	are sub	mitted	for filing.
Please	return all c	orrespondence concernir	ng this m	atter to:		
		John M. Stern		Ņ1	-	
		Contact Person				
		Winthrop & Weinstine, P.A.		<u>-</u>	_	
		Firm/Company				
	22	5 South Sixth Street, Suite 35	00			
		Address				
		Minneapolis, MN 55402				
		City, State and Zip Code	-,			
	,	dan.bolles@Dominiuminc.com	ור			
E	-mail address:	(to be used for future annual	report not	ification)		
For fu	ırther inforn	nation concerning this ma	atter, ple	ase call	:	
	30	ohn M. Stern	at (	612	_)	604-6400
	Name of Co	ontact Person	A	rea Code	and Day	rtime Telephone Number
Enclo	sed is a che	ck for the following amo	unt:			
\$52	2.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status		i5.00 Filin entified Co		\$113.75 Filing Fee, Certified Copy, and Certificate of Status
STRI	EET ADDR	ESS:		MAU	LING	ADDRESS:
Registration Section		Registration Section				
Division of Corporations		Division of Corporations				
Clifton Building 2661 Executive Center Circle			P. O. Box 6327 Tallahassee, FL 32314			
	hassee, FL			1 (4110)	11440000	(112 240 11
	• •					

# CERTIFICATE OF AMENDMENT TO $\frac{1}{2}$ CERTIFICATE OF LIMITED PARTNERSHIP

	Or				
Lake Weston Apartine	nts (Orlando) Limited Part	Inership			
Insert name currently on	file with Florida Departme	ent of State			
Pursuant to the provisions of section 620.1202, limited liability limited partnership, whose certi 02/03/1997, assigned F	ficate was filed with t lorida document numb	he Florida Department of S perA97000000306	or tate on		
adopts the following certificate of amendment to	o its certificate of limi	ted partnership.			
This amendment is submitted to amend the following	::				
A. If amending name, enter the new name of the here:	limited partnership o	r limited liability limited par	tnership		
New name must be distingui	ishable and contain an acc	eptable suffix.			
Acceptable Limited Partnership suffixes: Limited Partner Acceptable Limited Liability Limited Partnership suffixes	rship, Limited, L.P., LP, or s: Limited Liability Limited	r Ltd. d Partnership, L.L.L.P., or LLLP.			
B. If amending mailing address and/or principal office address here:	cipal office;address, g	enter new mailing address	and/or		
New Principal Office Address:		evard, Suite 150			
(Must be STREET address)	Plymouth, MN 55441				
New Mailing Address: (May be post office box)		evard, Suite 150			
C. If amending the registered agent and/or reginew registered agent and/or the new registered of	istered office address o <u>Mce address here</u> :	on our records, <u>enter the na</u>	me of the		
Name of New Registered Agent:					
New Registered Office Address:	<u> </u>	da street address			
	Emer Piori				
	City	, Florida Zip Code			
	***·		FE		
	Page 1 of 3	EST - 1.00			

## 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>	Name	Address 1	Type of Action
	Picerne Lake Weston Apartments Limited Partnership	247 N. Westmonte Dr Altumonte Springs, FL 32714	☐ Add ☑ Remove
-	Luke Weston Acquisitions, LLC	2905 Northwest Boulevard, Ste. 150 Plymouth, MN 55441	⊠ Add □ Remove
			Add Remove JUL 18 AH 8: 56
		11	Add Remove

E. If the limited	i partnership or	limited liability	/ limited	partnership	is amending its	: "iiminea	цавину
imited partners	hip" 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.)

Page 3 of 3

\$52.50

\$52.50

\$8.75

Filing Fee:

Certified Copy (optional): Certificate of Status (optional):

F. If amending any other information, enter	er change(s) here: (Attach add	ditional sheets, if necessary.)
	<u></u>	
Effective date, if other than the date of filing:_		
(Effective date cannot be prior to nor more than 90 day State.)	s after the date this document is j	filed by the Florida Department of
Signature(s) of a general partner or all gene		
(*NOTE: Only one current general partner is required removing a "limited liability limited partnership" election when adding or removing a "limited liability limited pa	on statement. Chapter 620, F.S.,	limited partnership is adding or requires all general partners to sig
		·
	42.2	
Signature(s) of all new or dissociating gene	raj partner(s), il any: GENERAL PART	NER:
WITHDRAWN GENERAL PARTNER:		
Picerne Lake Weston Apartments Limited Partnership	Lake Weston Ac	roleitions, JCC
By: Picerne Lake Weston Development, Inc., a Florida corporation, its general partner		Mer.
	By: Mark S. Moo	
Name:	its: Senior vice in	resident
Its:		
Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75		17 JUL 32.003 18.11.41.
Ser mineral Ar Similar (Abusines).		75 <b>a</b> 1
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