4/10/2017



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To:

Resubmission, Please

Division of Corporations

: (850)617-6383

keep file date of

From:

04/10/2017

: C T CORPORATION SYSTEM Account Name

Account Number : FCA000000023

Phone

: (614)280-3338

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.

F			44.	
Fwari	Address:			

LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION PARK VILLAS ASSOCIATES, LTD.

Certificate of Status	0
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Corporate Filing Menu

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O SIMMONS APR 1 3 2017

COVER LETTER

.TO:	Registratio	n Section		
	Division of	Corporations	•	
SUBJ	ECT:	ł	Park Villas Associates, Ltd.	
			artnership or Limited Liabi	lity Limited Parmership
The en	iclosed Certi	ficate of Amendment	and fee(s) are submitte	d for filing.
Please	return all co	rrespondence concerr	ing this matter to:	- Apropaga a sarray y majad
		Kenaya Camacho		
		Contact Person		
		Alden Torch Financial		
		Firm/Company		
		1225 17th Street, STE 140	0 \$	
		Address		
		Denver, Colorado 80202		
		City, State and Zip Code		
	ken	aya.camacho@aldentorch.	com	
E-1	mail address: (to be used for future annua	l report notification)	
For fur	ther informa	tion concerning this n	natter, please call:	
			at ()_	
	Name of Con	act Person	Area Code and Day	ytime Telephone Number
Enclose	ed is a check	for the following amo	ount;	•
S52.5	0 Filing Fee	\$61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fec and Certified Copy	\$113.75 Filing Fcc Certified Copy, and Certificate of Status
STREE	ET A D DRE	SS:	MAILING	ADDRESS:
Registra	ation Section	1	Registration	Section

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

	Park Villas	s Associates, Ltd.	
Insert name or		e with Florida Departm	ent of State
		9- 1.5	
Pursuant to the provisions of section 62 limited liability-limited partnership, when a column of the	ose certific	ate was filed with the	ne Florida Department of-State-or
02/11/1998 as adopts the following certificate of amer	signed Flor	ida document numb	er <u>A98000000405</u>
adopts the following confidence of affici	idinent to i	is ceruneate of inni	ted partnership.
This amendment is submitted to amend the	following:		
A. If amending name, <u>enter the new nan</u> <u>here</u> :	ne of the li	<u>wited partnership or</u>	limited liability limited partnersh
New name must be	distinguisha	ble and contain an acce	ptable suffix.
Acceptable Limited Partnership suffixes: Limite Acceptable Limited Liability Limited Partnersh	tp suffixes: L	imited Liability Limited	Partnership, L.L.L.P. or LLLP.
B. If amending mailing address and/ principal office address here:	or princip	al office address, <u>e</u>	oter new mailing address and/o
Marsa Parka at a 1 000 and 4 d			Fig. 1991
New Principal Office Add (Must be STREET address)	iress:		
	•		1
New Mailing Address:		%. .0	k-(mass)
(May be post office box)			
			<u> </u>
			1.
C. If amending the registered agent and new registered agent and/or the new regis	or register tered office	ed office address on address here:	our records, <u>enter the name of th</u>
Name of New Registered Agent:	CTC	orporation System	
New Registered Office Address:	1200	South Pine Island Ro	ad
, , , , , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·	Enter Florida	street address
	Plant	ation	, Florida 33324
	•	City	Zip Code

13

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.

It 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	Type of Action
GP	Grand Marais, LLC	1225 17th Street, STE 1400 Denver, Colorado 80202	Add Remove
<u>GP</u>	CAH-IDA Park Villas LLC	2801 Alaskan Way, Suite 200 Seattle, WA 98121	Add Remove
***************************************			Add Remove
			Add . O
			Add J
			Add Remove
			-

E. If the limited partnership or limited liability limited partnership is amending its "limited liability limited partnership" status, enter change here: $\frac{1}{\sqrt{2}}$

This Limited Partnership	hereby elects to be a	"Limited Liability Lim	ited 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.)

Effective date, if other than the date of (Effective date cannot be prior to nor more than	filing: In 90 days after the date this document is filed by the Florida Departme	ent of
State.)	· ·	5,
Signature(s) of a general partner or a	all general nartners*:	
removing a "limited liability limited partnership	required to sign this document unless the limited partnership is adding a p" election statement. Chapter 620, F.S., requires all general partners in	o sign
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Certificate of Status (optional): \$8.75