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.

(((H110002041243)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : KAT2, BARRON, SQUITERO AND FAUST

Account Number : 072627002473 : (305)856-2444 Phone Fax Number : (305)285-9227

\*\*Enter the email address for this business entity to be used for Future annual report mailings. Enter only one email address please. \*\*

LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION -BAYSHORE APARTMENTS OF MANATEE LIMITED PARTNERSHIP

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$52.50

C. LEWIS

AUG 1 6 2011

EXAMINER

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2011 AUG 15 AM 7:55

## CERTIFICATE OF AMENDMENT

TO SECRETARY OF STATE
CERTIFICATE OF LIMITED PARTNERSHIP OF

BAYSHORE APARTM	LENTS (	of Manatee Lim	ITED PARTNE	RSHIP			
Insert name currer	itly on fil	le with Florida Depart	ment of State				
Pursuant to the provisions of section 620.1 limited liability limited partnership, whose 12/23/1998, assign	e certifi	cate was filed with	the Florida I				
adopts the following certificate of amenda				hip.			
This amendment is submitted to amend the following	lowing:	,					
A. If amending name, enter the new name here:	of the li	<u>imited partnership</u>	or limited liab	ility limited partnership			
New name must be di	stinguish	able and contain an a	cceptable suffix.				
Acceptable Limited Partnership suffixes: Limited I Acceptable Limited Liability Limited Partnership s	ortnersh ruffixes:	hip, Limited, L.P., LP, Limited Liability Limi	or Ltd. ted Partnership,	LLLP. or LLLP.			
B. If amending mailing address and/or principal office address here:	princij	pal office address	, <u>enter new n</u>	nailing address and/or			
New Principal Office Addre	SS:	6740 East Rogers Circle					
(Must be STREET address)		Boca Raton, FL 33487					
New Mailing Address:		6740 East Rog					
(May be post office box)		Boca Raton, FL 33487					
			<u></u>				
C. If amending the registered agent and/onew registered agent and/or the new register			on our record	s, enter the name of the			
Name of New Registered Agent:	Corpo	co, Inc.					
New Registered Office Address:	2699 S. Bayshore Drive, 7th Floor  Enter Florida street address						
		Miami					
		City	, Flonda	33133 Zip Code			
				-r			

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P. 003

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Changing Registered Agent, Signature of New Registered Agent

## 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.

Coxpoo, Inc.

Erica L. English, Esq., Vice President of Corpco, Inc. D. If amending the general partner(s), enter the name and business address of each general partner being added or removed from our records: Title <u>Name</u> Type of Action Address N/A ∏Add Remove Remove Remove Remove □Add Remove TAdd 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."

Page 2 of 3

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

This Limited Partnership hereby removes its "Limited Liability Limited Partnership" status.

## H11000204243

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SECRETARY OF STATE TALLAHASSEE. FLORIDA

F. If amending any other infor	mation, enter e	:hange(s) b	ere: (Attach a	additional shee	ts, If necessary.)
Address for General Partner (B	ayshore Apa	tments o	f Manatee,	nc.) is now:	
6740 East Rogers Circle					
Boca Raton, FL 33487					
,				···	
Effective date, if other than the dat (Effective date cannot be prior to nor mor State.)	e of filing: e than 90 days a	Upon F; Rer the date	iling this document i	s filed by the FI	orida Department of
Signature(s) of a general partner	or all genera	l parmen	<u>8*:</u>		
("NOTE: Only one current general party removing a "limited liability limited party when adding or removing a "limited liabil General Partner:	tership" election lity limited partn	statemian. 🤇	Chapter 620, F.S	S., requires all g	ership is adding or eneral pertners to sign
Bayshore Apartments of Mana	ites, Inc.	•			
'Adam H. Morton, President	<del></del> -		<u></u>		
		-			
		; -			
	<del>-</del>				
Signature(s) of all new or dissoci	ating general	partner	t), if any:		
N/A		, -		·	
	•	•			
	<del></del>	•	·	· <del>···</del>	
Filing Fee:	\$52.50				
Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$8.75	•	•		

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