

# A99000001675

Division of Corporations

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Florida Department of State  
Division of Corporations  
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**LP/LLP AMENDMENT/RESTATEMENT/CORRECTION  
HI LIMITED PARTNERSHIP**

Certificate of Status	0
Certified Copy	1
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September 8, 2014

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

HI LIMITED PARTNERSHIP  
1815 THE EXCHANGE  
ATLANTA, GA 30339-2040

SUBJECT: HI LIMITED PARTNERSHIP  
REF: A99000001675

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability limited partnership must have an active registration/filing on file with this office before this filing can be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

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.

Teresa Brown  
Regulatory Specialist II

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DIVISION OF CORPORATIONS  
BUREAU OF COMMERCIAL  
INFORMATION SERVICES

*Note:  
9/11/2014  
The General Partnership  
has just been  
submitted.*

P.O BOX 6327 - Tallahassee, Florida 32314

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**SECOND AMENDED CERTIFICATE OF LIMITED PARTNERSHIP  
OF  
HI LIMITED PARTNERSHIP**

This SECOND AMENDED CERTIFICATE OF LIMITED PARTNERSHIP (this "Certificate") of HI LIMITED PARTNERSHIP, a Florida limited partnership (the "Limited Partnership"), organized pursuant to a certificate of limited partnership filed on October 13, 1999 and bearing Florida Secretary of State No. A99000001675, is executed by HOA IP GP, LLC, a Delaware limited liability company, as the sole general partner of the Limited Partnership (the "General Partner"), on behalf of and as the act of the Limited Partnership, and is to be filed with the Florida Secretary of State pursuant to Section 620.1202 of the Florida Revised Uniform Limited Partnership Act of 2005 (the "Act").

The undersigned General Partner certifies as follows:

1. The name of the Limited Partnership is "HI Limited Partnership".
2. The address of the office required to be maintained pursuant to Section 620.1114(1)(a) of the Act is:  
  
1815 The Exchange  
Atlanta, Georgia 30339-2040
3. The name and address of the Limited Partnership's agent for service of process required to be maintained pursuant to Section 620.1114(1)(b) of the Act is:  
  
CT Corporation System  
1200 South Pine Island Road  
Plantation, Florida 33324
4. The name and business address of the sole General Partner of the Limited Partnership is:  
  

<u>Name</u>	<u>Address</u>
HOA IP GP, LLC	1815 The Exchange Atlanta, Georgia 30339-2040
5. The mailing address of the Limited Partnership is:  
  
HI Limited Partnership  
1815 The Exchange  
Atlanta, Georgia 30339-2040
6. The latest date upon which the Limited Partnership is to dissolve is December 31, 2029.

IN WITNESS WHEREOF, the undersigned General Partner has executed this Second Amended Certificate of Limited Partnership on this 3rd day of September, 2014, and hereby certifies under penalties of perjury that the facts stated herein are true.

HOA IP GP, LLC, as the sole General Partner of HI Limited Partnership

By: 

Name: Terfance Marks

Title: President and Chief Executive Officer

**ACCEPTANCE BY REGISTERED AGENT**

Having been named as registered agent to accept service of process for HI Limited Partnership, a Florida limited partnership, at the place designated in the foregoing Second Amended Certificate of Limited Partnership, the undersigned hereby accepts the appointment as registered agent, and states that he is familiar with and accepts the obligations of the position as registered agent and agrees to act in that capacity.

Dated: September 5, 2014

CT CORPORATION SYSTEM

By: 

Name: Bonnie A Schuman

Title: Assistant Secretary