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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

J. BROWN MAY - 4 2005

**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** 2504 Conway Venture L.P.  
(Name of Limited Partnership)

**FLORIDA REGISTRATION NUMBER:** B04000000044

The enclosed Certificate of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Connie Lopez  
(Name of Person)  
2504 Conway Venture L.P.  
(Firm/Company)  
333 N. Michigan Ave., Suite 501  
(Address)  
Chicago, IL 60601  
(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Connie Lopez at (312) 263-3800  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$52.50 Filing Fee      ☐ \$61.25 Filing Fee & Certificate of Status      ☐ \$105.00 Filing Fee & Certified Copy (additional copy is enclosed)      ☐ \$113.75 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**CERTIFICATE OF AMENDMENT  
TO  
APPLICATION FOR REGISTRATION  
OF**

FILED  
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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

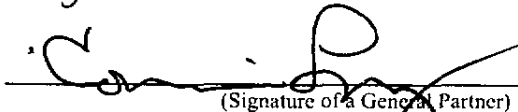
2504 Conway Venture L.P.

(Insert name currently on file with Florida Dept. of State)

Pursuant to the provisions of section 620.173, Florida Statutes, this foreign limited partnership hereby submits this Certificate of Amendment to its registration application:

The registration application is amended as follows:

The name of the General Partner has been changed  
from "Mallard Cove Apartments Corp." to  
"2504 Conway Apartments Corp."



(Signature of a General Partner)

Connie Lopez, Secretary of 2504 Conway Apartments Corp.

(Typed or printed name of General Partner signing above)

STATE OF Illinois

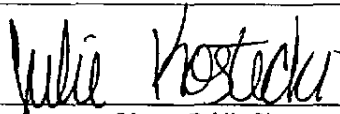
COUNTY OF Hane

On this 20 day of April, 2005, Connie Lopez personally  
appeared before me,



who is personally known to me

whose identity I proved on the basis of \_\_\_\_\_



(Notary Public Signature)

Julie Hosteck

(Notary's Printed Name)

Seal



My Commission Expires:

10.9.07