

B05000000293

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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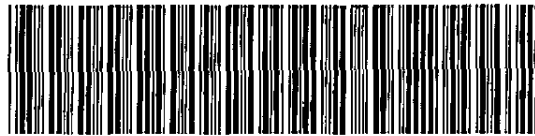
(Business Entity Name)

(Document Number)

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STATE

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05 SEP -8 AM 10:46
DIVISION OF REGISTRATION



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 584860 4344659

AUTHORIZATION : *Patricia J. Jett*

COST LIMIT : \$ 105.00

ORDER DATE : September 8, 2005

ORDER TIME : 9:16 AM

ORDER NO. : 584860-005

CUSTOMER NO: 4344659

CUSTOMER: Mr. Andrew F. Dunstan
Greenberg Traurig, P.a.
Suite 300 E.
777 South Flagler Dr.
West Palm Beach, FL 33401

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOMESTIC AMENDMENT FILING

NAME: CSC LAKE WORTH LIMITED
PARTNERSHIP

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Carina L. Dunlap -- EXT# 2951

EXAMINER'S INITIALS: _____

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

CSC LAKE WORTH LIMITED PARTNERSHIP

(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 names and street addresses of the general partners are:

CSC Lake Worth GP Corporation ^{F05000003850} 250 Australian Avenue South, Suite 1003, West Palm Beach, Florida 33401

Lake Worth Hotel, LLC 280 Park Avenue, 37th Floor, New York, NY 10017

^{M05000003862}
CSC LAKE WORTH GP CORPORATION


(Signature of a General Partner)

By: Adam Schlesinger, President

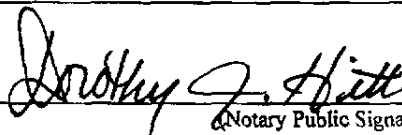
(Typed or printed name of General Partner signing above)

STATE OF FLORIDA

COUNTY OF PALM BEACH

On this 31st day of August, 2005, Adam Schlesinger personally appeared before me,

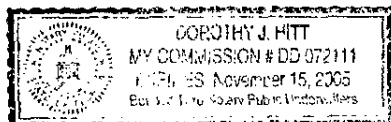
- ☒ who is personally known to me
☐ whose identity I proved on the basis of _____


(Notary Public Signature)

Dorothy J. Hitt

(Notary's Printed Name)

Seal



My Commission Expires:

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