

B05000000488

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

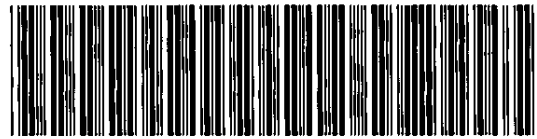
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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RECEIVED  
07 SEP 17 PM 4:24  
REGISTRATION DIVISION  
TALLAHASSEE, FLORIDA

FILED  
07 SEP 17 AM 8:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032  
REFERENCE : 226744 5022062  
AUTHORIZATION : *[Signature]*  
COST LIMIT : \$ 105.00

**FILED**  
07 SEP 17 AM 8:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ORDER DATE : September 13, 2007  
ORDER TIME : 3:49 PM  
ORDER NO. : 226744-020  
CUSTOMER NO: 5022062

FOREIGN FILINGS

NAME: MGI ST. JOHNS LIMITED PARTNERSHIP

XX      LIMITED PARTNERSHIP

XXXX AMENDMENT

File 1st

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX      CERTIFIED COPY

CONTACT PERSON: Joyce Markley -- EXT# 2930

EXAMINER: \_\_\_\_\_

**AMENDMENT TO CERTIFICATE OF AUTHORITY  
FOR  
FOREIGN LIMITED PARTNERSHIP OR  
LIMITED LIABILITY LIMITED PARTNERSHIP**

**FILED**  
07 SEP 17 AM 8:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of the limited partnership or limited liability limited partnership as it appears on the records of the Florida Department of State is:

MGI St. Johns Limited Partnership

2. The jurisdiction of its formation is: Texas

3. The date the entity was authorized to transact business in Florida is: 11/9/2005

4. If the amendment changes the name of the limited partnership or limited liability limited partnership, enter the new name:

Simpson St. Johns Limited Partnership

*Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.*

*Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.*

5. If the amendment changes the general partner(s), list the name and business address of each general partner:

Name:

Business Address:

SHLP St. Johns, LLC

8110 East Union Avenue, Suite 200

Denver, CO 80237

LUTWUW90710

6. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

7. If the amendment corrects any false statement listed in the application, indicate the statement being corrected and the correction:

The mailing address of the partnership is 8110 East Union Avenue, #200

Denver, Colorado 80237

8. If the amendment is to add or delete an election to be a limited liability limited partnership statement, check the appropriate box:

The entity elects to be a limited liability limited partnership.

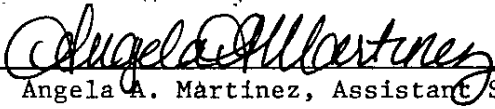
The entity is no longer a limited liability limited partnership.

9. Attached is an original certificate, no more than 90 days olds, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

10. Effective date, if other than the date of filing: \_\_\_\_\_

(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

SHLP St. Johns, LLC, general partner  
By: Simpson Housing LLLP, Manager  
By: Colomba LLC, general partner



Angela A. Martinez, Assistant Secretary

Typed or printed name:

Angela A. Martinez

Filing Fee:	\$52.50
Certified Copy (optional):	\$52.50
Certificate of Status (optional):	\$8.75

Corporations Section  
P.O. Box 13697  
Austin, Texas 78711-3697



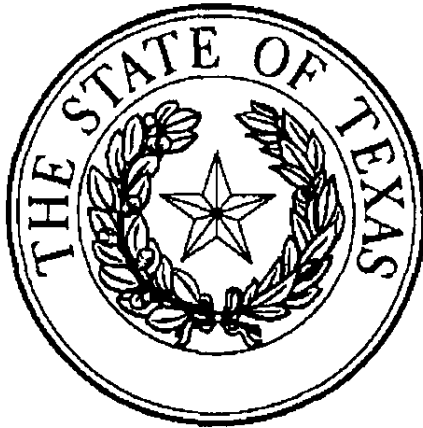
Phil Wilson  
Secretary of State

## Office of the Secretary of State

### Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that on September 13, 2007, MGI St. Johns Limited Partnership, a Domestic Limited Partnership (LP) (file number 800557580), changed its name to Simpson St. Johns Limited Partnership.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on September 14, 2007.



A handwritten signature in cursive script that reads "Phil Wilson".

Phil Wilson  
Secretary of State