B14000000005

	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-UI	P WAIT MAIL	
	(Business Entity Name)	
(Document Number)		
Certified Copies	Certificates of Status	
Special Instructions to Filing Officer:		

Office Use Only



700307436637



18 JAN 24 AHII: 2

S. WARREN JAN 25 2018 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 868277 7906691

AUTHORIZATION : Smell Bonn

COST LIMIT : \$\sqrt{5}2.50

ORDER DATE: October 16, 2017

ORDER TIME: 2:38 PM

ORDER NO. : 868277-071

CUSTOMER NO: 7906691

XX ANNUAL REPORT

ANNUAL REPORT FILING

NAME: 2015-1 IH2 BORROWER L.P.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amy S. Zeigler - Ext. 62317

EXAMINER'S INITIALS:

STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

2015-1 IH2 Borrower L.P.
Insert name currently on file with Florida Department of State
B14000000265
Florida Document Number of Limited Partnership or Limited Liability Limited Partnership
Pursuant to the provisions of section 620.1207, Florida Statutes, this limited partnership or limited liability limited partnership submits the following statement of correction.
FIRST: The reason for filing this statement of correction is: The record contained false or erroneous information. The record was defectively signed.
in the focult was defectively signed.
SECOND: This statement corrects 2018 Annual Report
Specify document type being corrected
filed with the Florida Department of State on 1/11/2018 Insert date document filed with Dept. of State
THIRD: The false or erroneous information or defect is as follows: Eric Jacobson, Authorized Person, was listed as the signor and should not have been.
FOURTH: The false or erroneous information or defect is corrected as follows: Mark Solls, Authorized Person, should be listed as the signor.

Signature of a general partner*: (*Note: If adding or deleting apelection to be a limite partners nass sign. If adding additional general partners nass sign. If adding additional general partners nass sign.	ed liability limited partnership statement, all general ner(s), the new general partner(s) must sign).
Signature(s) of <u>new</u> general partner(s), if any	:
Signature of new registered agent, if applicable :(N registered agent must sign accepting the designation	
I hereby accept the appointment as registered agent to comply with the provisions of all statutes relative duties, and I am familiar with and accept the obliga	to the proper and complete performance of my
Signature of Regis	tered Agent

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

8 JAN 24 AN II: 27