B15000000284

(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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400289284024

DEPARTMENT OF STATE

K. SALY EXAMINER AUG 3 0 CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO.: 120000000195

REFERENCE: 267805 7288091

AUTHORIZATION:

COST LIMIT : \$ 52.50 (

ORDER DATE: August 25, 2016

ORDER TIME: 10:31 AM

ORDER NO.: 267805-005

CUSTOMER NO: 7288091

FOREIGN FILINGS

NAME: 701-703 WATERFORD OPERATING

CORPORATE

XX LIMITED PARTNERSHIP

LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER: _____



August 29, 2016

CSC MELISSA ZENDER

RESUBMIT

Please give original submission date as file date.

SUBJECT: 701-703 WATERFORD OPERATING LP

Ref. Number: B15000000284

We have received your document for 701-703 WATERFORD OPERATING LP and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please state what action you would like for John Gay ie... Add, Remove or Change.

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.

Karen A Saly Regulatory Specialist II

Letter Number: 016A00018288

OCPARIMENT TO THE

AMENDMENT TO CERTIFICATE OF AUTHORITY
FOR

FOR

AMENDMENT TO CERTIFICATE OF AUTHORITY
FOR

ALLAHASSEE, FLORIOR

ORIOR

1. The name of the limited partnership or limite the Florida Department of State is: 701-703 WATERFORD OPERATING LP	d liability limited partnership as	it appears on the records of
2. Document Number of Foreign Limited Partner	ership or Limited Liability Limit	ed Partnership: B15000000284
2. The jurisdiction of its formation is: DE		
3. The date the entity was authorized to transac	t business in Florida is: 10/21/2015	5
4. If the amendment changes the name of the linthe new name:	mited partnership or limited liab	ility limited partnership, enter
Acceptable Limited Partnership suffixes: Limite Acceptable Limited Liability Limited Partnershi LLLP.		
5. If the amendment changes the general partne Name:	r(s), list the name and business a <u>Business Address:</u>	address of each general partner:
ALEXANDER HANCOCK	730 THIRD AVENUE	₽₽∀
	NEW YORK, NY 10017	Remove Change
BRAD E. SIMPKINS	730 THIRD AVENUE	■Add
	NEW YORK, NY 10017	∏Remove ☐Change
JOHN GAY	730 THIRD AVENUE	Add
	NEW YORK, NY 10017	Remove Change
· · · · · · · · · · · · · · · · · · ·		bdd
		Remove Change
		∏Add
		☐Remove ☐Change
	-	Add
		Remove Change

5. If the amendment changes the jurisdiction of organization, indicate new jurisdiction: 18 18 18 18 18 18 18 1
5. If the amendment changes the jurisdiction of organization, indicate new jurisdiction: (ALLAHASSEE STATE OF SATE OF
I. If the amendment corrects any false statement listed in the application, indicate the statement being corrected and the correction:
3. If the amendment is to add or delete an election to be a limited liability limited partnership statement, check he appropriate box:
The entity elects to be a limited liability limited partnership.
The entity is no longer a limited liability limited partnership.
Attached is an original certificate, no more than 90 days olds, evidencing the aforementioned imendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.
0. Effective date, if other than the date of filing:
Signature of a general partner:
Mayorie Gur Muist
Marjorie Pierre-Merritt

255 255 Carlot Carlotte

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Filing Fee:

Certified Copy (optional):

Certificate of Status (optional): \$8.75

\$52.50

\$52.50