

B15000000290

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

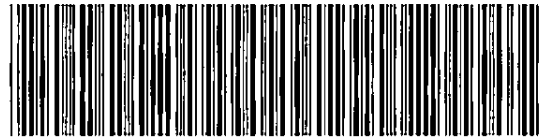
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500438829485

LP Amend

FILED
2024 OCT 30 PM 12:33
CLERK OF SUPERIOR COURT
ALBUQUERQUE, NEW MEXICO

A. RAMSEY
OCT 31 2024

FILED
2024 OCT 30 PM 3:55
CLERK OF SUPERIOR COURT
ALBUQUERQUE, NEW MEXICO



CSC - Tallahassee
1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext: x61563

A handwritten signature in black ink, appearing to read 'Shauna Godbolt', is written over the word 'To:' in the following line.

To: Department Of State, Division Of Corporations

From: Shauna Godbolt

Ext: x61563

Date: 10/30/24

Order #: 1665724-5

Re: 5200 Waterford Operating LP

Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Amount to be deducted from our State Account: \$52.50- FL State Account Number:
120000000195

Please take the following action:

File in your office on basis
Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 5200 Waterford Operating LP

Name of Foreign Limited Partnership or Limited Liability Limited Partnership

The enclosed amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Donna Cohen

Contact Person

TIAA

Firm/Company

730 Third Avenue

Address

New York, NY 10017

City, State and Zip Code

subsidiaryregulatoryreportingteam@tiaa.org

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Name of Contact Person

at (_____) _____
Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|---|
| <input type="checkbox"/> \$52.50 Filing Fee | <input type="checkbox"/> \$61.25 Filing Fee
and Certificate of
Status | <input type="checkbox"/> \$105.00 Filing Fee
and Certified Copy | <input type="checkbox"/> \$113.75 Filing Fee,
Certified Copy, and
Certificate of Status |
|---|---|--|---|

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

FILED

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

2014 OCT 30 PM 12:33

OFFICE OF THE 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:

5200 Waterford Operating LP

2. Document Number of Foreign Limited Partnership or Limited Liability Limited Partnership: B15000000290

3. The jurisdiction of its formation is: Delaware

3. The date the entity was authorized to transact business in Florida is: 10/21/2015

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

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.

(If name unavailable in Florida, enter alternate name adopted for the purpose of transacting business in Florida.)

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

Charles Russo

801 Brickell Avenue, Suite 2310

☐ Add

Miami, FL 33131

☐ Remove

☒ Change

Brenda Wilson

8625 Andrew Carnegie Blvd., 2nd Floor

☒ Add

Charlotte, NC 28262

☐ Remove

☐ Change

John Cornuke

4675 MacArthur Court, 11th Floor

☒ Add

Newport Beach, CA 99133

☐ Remove

☐ Change

Alexander Hancock

730 Third Avenue

☐ Add

New York, NY 10017

☒ Remove

☐ Change

Brad Simpkins

730 Third Avenue

☐ Add

New York, NY 10017

☒ Remove

☐ Change

☐ Add

☐ Remove

☐ Change

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:

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: _____ (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Signature of a general partner:

Donna Cohen

Typed or printed name:

Donna Cohen

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

AMEND-19524