B1600000256

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	idress)	
	•	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
•	,	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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J. LEGGETT APR 0 5 2018





FLORIDA DEPARTMENT OF STATE Division of Corporations

April 3, 2018

CORPORATION SERVICE COMPANY

SUBJECT: FHF I, L.P.

Ref. Number: B16000000256

We have received your document for FHF i, L.P. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Any partner or agent of a partnership that is a legal or other commercial entity, and not an individual, must be organized or otherwise registered and maintain an active status with the Florida Department of State. It cannot be dissolved, revoked, canceled or withdrawn.

Please return the corrected original and one copy of 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.

Judy A Leggett Regulatory Specialist II Registration Section

Letter Number: 718A00006628

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT	NO.	:	I20000000195
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REFERENCE: 131257 5138497

AUTHORIZATION : Oxpull of

COST LIMIT : \$`52**`5**0

ORDER DATE: March 23, 2018

ORDER TIME : 2:46 PM

ORDER NO. : 131257-080

CUSTOMER NO: 5138497

FOREIGN FILINGS

NAME: FHF I, L.P.

CORPORATE LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY
XXXX AMENDMENT
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY YX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Roxanne Turner EXT# 62969

EXAMINER:

COVER LETTER

TO: Registration S Division of C				
•	•	•		
SUBJECT: FHF			· · · · · · · · · · · · · · · · · · ·	
	Name of Foreign Limited	Partnership or Limited Lia	bility Limited Partnership	
The enclosed amenda	ment and fee(s) are sub	mitted for filing.		
Please return all corre	Please return all correspondence concerning this matter to:			
Jennifer Syr	mis			
	Contact Person			
TA Realty Li	_C			
	Firm/Company			
28 State Stre	eet, 10th Floo	r		
,	Address			
Boston, MA 02109				
City, State and Zip Code				
Syrmis@tarealty.com				
E-mail address: (to	be used for future annual re	port notification)		
For further information concerning this matter, please call:				
Jennifer Syrmis at 617 476-2797				
Name of Contact Person Area Code and Daytime Telephone Number				
Enclosed is a check for the following amount:				
\$52.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fee and Certified Copy	\$113.75 Filing Fee, Certified Copy, and Certificate of Status	
STREET ADDRESS: MAILING ADDRESS: Registration Section Registration Section				
Division of Corporat	ions	Division of C		
Clifton Building 2661 Executive Cent	ar Cirola	P. O. Box 632 Tallahassee, F		
Tallahacee FI 323		i ananassee, i	L 32314	

AMENDMENT TO CERTIFICATE OF AUTHORITY FOR

FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

1. The name of the limited partnership or the Florida Department of State is: FHF I, LP.	imited liability limited partnership as it	t appears on the records of
2. Document Number of Foreign Limited I	artnership or Limited Liability Limited	Partnership: 816000000256
2. The jurisdiction of its formation is: DE		
3. The date the entity was authorized to tra	unsact business in Florida is: 11/29/2016	
4. If the amendment changes the name of the new name: TA Realty Core Property Fund PF-1, L.P.	he limited partnership or limited liabili	ty limited partnership, enter
Acceptable Limited Partnership suffixes: Acceptable Limited Liability Limited Partn LLLP.		or Ltd.
5. If the amendment changes the general p Name:	artner(s), list the name and business add Business Address:	dress of each general partner:
FHF I GP, LLC	28 State Street, 10th Floor	Add
	Boston, MA 02109	■ Remove
TAR CPF GP, LLC	28 State Street, 10th Floor	\ Add
	Boston, MA 02109	Remove Change
		Add Remove Change
		Add Remove Change
		Add Remove Change
		Add Remove Change

7. If the amenda corrected and the		se statement listed in the a	pplication, indicate the	he statement l	being
3" 20-		1			<u> 12</u>
				·	
					······································
8. If the amendr		ete an election to be a limit	ed liability limited p	artnership sta	tement, chec
	The entity elects to	be a limited liability limite	ed partnership.		
	The entity is no lon	ger a limited liability limit	ed partnership.		
	luly authenticated by	, no more than 90 days old the official having custod			ler the law o
10. Effective da (Effective date c Department of S	annot de prior to not	date of filing: 3 26 r r more than 90 days after t	18 he date this documer	it is filed by th	he Florida
Signature of a go	eneral partner: 1 Daly	ple			
Typed or printed	l name:	-			
Scott L. D	alrymple				
Filing Fee:	C B	\$52.50			
Certified Copy Certificate of S	(optional): tatus (optional): \$8	\$52.50 3.75			•

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT THE SAID "FHF I, L.P.", FILED A

CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "TA REALTY CORE

PROPERTY FUND PF-1, L.P." ON THE TWENTY-SECOND DAY OF MARCH,

A.D. 2018, AT 3:02 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF AMENDMENT IS THE TWENTY-SIXTH DAY OF MARCH, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED

PARTNERSHIP IS DULY FORMED UNDER THE LAWS OF THE STATE OF

DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT

HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS

OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

Authentication: 202387679

Date: 03-26-18

5765688 8320 SR# 20182172500