

B93000000015

Division of Corporations

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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : LOWNDES, DROSDICK, DOSTER, KANTOR & REED, P.A.
Account Number : 072720000036
Phone : (407) 843-4600
Fax Number : (407) 843-4444

Att: Tami Paisley

SECRETARY OF STATE
TALLAHASSEE FLORIDA

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LP/LLP AMENDMENT/RESTATEMENT/CORRECTION

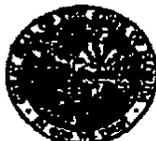
BUENA VISTA AT CYPRESS POINT LIMITED PARTNERSHIP

Certificate of Status	0
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Estimated Charge	\$105.00

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October 1, 2008

FLORIDA DEPARTMENT OF STATE
Division of Corporations

LOWNDES, DROSDICK

SUBJECT: BUENA VISTA AT CYPRESS POINT LIMITED PARTNERSHIP
REF: B93000000015

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

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) 245-6067.

Neysa Culligan
Document Specialist

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TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

- 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:
Buena Vista at Cypress Point Limited Partnership
- 2. The jurisdiction of its formation is: Texas
- 3. The date the entity was authorized to transact business in Florida is: 1/5/1993
- 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.*

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

<u>Name:</u>	<u>Business Address:</u>
<u>BRM Florida Buena Vista Pointe, LLC</u>	<u>501 North Magnolia Avenue</u>
<u>L08-75457</u>	<u>Orlando, Florida 32801</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

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

n/a

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

n/a

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.

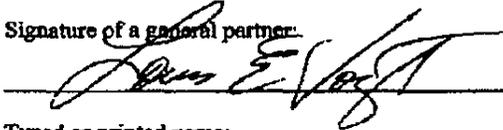
The entity is no longer a limited liability limited partnership.

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.)

Signature of a general partner:



Typed or printed name:

Louis Vogt for BRM Florida Buena Vista Pointe, LLC

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

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 TALLAHASSEE FLORIDA

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



Hope Andrade
Secretary of State

Office of the Secretary of State

**CERTIFICATE OF FILING
OF**

BUENA VISTA AT CYPRESS POINT LIMITED PARTNERSHIP
File Number: 6405410

The undersigned, as Secretary of State of Texas, hereby certifies that an amendment to the certificate of limited partnership or the application for registration as a foreign limited partnership for the above named limited partnership has been received in this office and filed as provided by law on the date shown below.

Accordingly, the undersigned, as Secretary of State hereby issues this Certificate evidencing the filing in this office.

Dated: 09/26/2008
Effective: 09/26/2008



A handwritten signature in cursive script, appearing to read "Hope Andrade".

Hope Andrade
Secretary of State