

Document Number Only

B94000000404

CORPORATION STATE

660 EAST JEFFERSON STREET

Requestor's Name
TALLAHASSEE, FL 32301

Address
222-1092

City State Zip Phone

CORPORATION(S) NAME

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
97 FEB 25 PM 1:28

WHTR Real Estate LP

000002101340--4

-02/28/97--01083--014

****105.00 ****105.00

- ☐ Profit
☐ NonProfit
☐ Limited Liability Co.
☐ Foreign
☒ Limited Partnership - Amend
☐ Reinstatement
☐ Certified Copy
☐ Call When Ready
☒ Walk In
☐ Mail Out
- ☐ Amendment
☐ Dissolution/Withdrawal
☐ Annual Report
☐ Reservation
☐ Photo Copies
☐ Call if Problem
☐ Will Wait
- ☐ Merger
☐ Mark
☐ Other
☐ Change of R.A.
☐ Fictitious Name Filing
☐ CUS
☐ After 4:30
☒ Pick Up

Name
Availability
Document Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

11/27 BK
2/25/97

J. TAX _____
 FILING 52.50
 R. AGENT FEE _____
 C. COPY 52.50
 TOTAL 105.00
 N. BANK _____
 BALANCE DUE _____
 OFFFIND _____

**CERTIFICATE OF AMENDMENT
TO
APPLICATION FOR REGISTRATION
OF**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
97 FEB 25 PM 1:28

WHTR Real Estate Limited Partnership

(insert name currently on file with Florida Dept. of State)

Pursuant to the provisions of section 620.173 Florida Statutes, this foreign limited partnership hereby submits this certificate of amendment to its registration application:

The registration application is amended as follows:

The following general partner has withdrawn: JER WHTR Services, Inc., 11 Canal Center Plaza, # 200, Alexandria, VA 22314. The partnership shall continue and WHTR Investors, Inc. shall remain as the sole general partner.

WHTR Investors, Inc., general partner

By: *Elizabeth A. O'Brien*

(Signature of a General Partner)

Elizabeth A. O'Brien

Vice President

(Typed or printed name of General Partner signing above)

STATE OF New York

COUNTY OF New York

On this 18th day of November, 19 96, Elizabeth O'Brien personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of

Frances DeLuca

(Notary Public Signature)

FRANCES DeLuca

(Notary's Printed Name)

Seal

My Commission Expires: _____