

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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(((H180003039473)))



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To: Division of Corporations
Fax Number : (350) 617-6383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614) 230-3338
Fax Number : (954) 208-0845

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION
CCAT 2 LIMITED PARTNERSHIP

Certificate of Status	0
Certified Copy	1
Page Count	03
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EXAMINER

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November 1, 2018

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CCAT 2 LIMITED PARTNERSHIP
P.O. BOX 1700
ATTN: LEGAL DEPARTMENT
LAKE OSWEGO, OR 97035-8646US

SUBJECT: CCAT 2 LIMITED PARTNERSHIP
REF: B95000000205

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.

The document must be signed by the dissociating general partner unless the document states the general partner is deceased or a guardian or general conservator has been appointed or the general partner previously filed a Statement of Dissociation with the Florida Department of State.

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.

Nanette Causseaux FAX Aud. #: H18000303947
Regulatory Specialist II Supervisor Letter Number: 618A00022587

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CLERK 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:

CCAT 2 LIMITED PARTNERSHIP

2. Document Number of Foreign Limited Partnership or Limited Liability Limited Partnership: B95000000205

3. The jurisdiction of its formation is: Delaware

4. The date the entity was authorized to transact business in Florida is: June 6, 1995

5. 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:

Name:

Business Address:

Harvest General Partner II LLC

2250 McGilchrist Street SE

☐ Add

☒ Remove

☐ Change

Salem, Oregon 97302

Holiday AL General Partner II LLC

480 North Orlando Avenue, Suite 236

☒ Add

☐ Remove

☐ Change

Winter Park, Florida 32789

☐ Add

☐ Remove

☐ Change

☐ Add

☐ Remove

☐ Change

☐ Add

☐ Remove

☐ Change

☐ Add

☐ Remove

☐ Change

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DEPT. OF STATE
TALLAHASSEE, FLORIDA

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.

GENERAL PARTNER:

HOLIDAY AL GENERAL PARTNER II LLC, a Delaware
limited liability company

By: Christopher Bouchard

Name: Christopher Bouchard

Title: Chief Legal Officer

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

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