

B98000000219

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

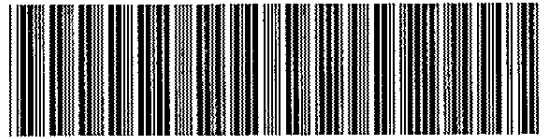
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000030830780

FILED

RECEIVED

04 APR -2 AM 10:01

04 APR -2 AM 10:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE
DIVISION
TALLAHASSEE, FLORIDA

Handwritten signature/initials



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 0721000000032

REFERENCE : 539924 4373439

AUTHORIZATION : *Patricia Pijoto*

COST LIMIT : \$ 52.50

ORDER DATE : April 1, 2004

ORDER TIME : 10:05 AM

ORDER NO. : 539924-005

CUSTOMER NO: 4373439

CUSTOMER: Scott Kenyon, Paralegal
Akin, Gump, Strauss, Hauer &
19th Floor
590 Madison Avenue
New York, NY 10022

FOREIGN FILINGS

NAME: CROCKER OPERATING PARTNERSHIP,
L.P.

 PROFIT
 NON-PROFIT

 CORPORATE
XX LIMITED PARTNERSHIP

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman -- EXT# 2908

EXAMINER: _____

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

FILED
04 APR -2 AM 10:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Crocker Operating Partnership, L.P.

(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:

1. The name of this foreign limited partnership (the "Partnership") has been changed to AP-Southeast Operating Partnership LP.
2. The general partner of the Partnership has been changed to Kronus Property Holdings LLC (the "G.P.").

m970000047


(Signature of a General Partner)

John R.S. Jacobsson, Vice President of G.P.

(Typed or printed name of General Partner signing above)

STATE OF NEW YORK

COUNTY OF NEW YORK


On this 31st day of March, 2004, John R.S. Jacobsson personally appeared before me,



who is personally known to me



whose identity I proved on the basis of _____


(Notary Public Signature)

H. SCOTT KENYON

(Notary's Printed Name)

H. SCOTT KENYON
Notary Public, State of New York
No. 01KE5016236
Qualified in Rockland County
Certificate Filed in New York County
Commission Expires August 9, 2005

Seal

My Commission Expires: 8/9/2005