89900000054

(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



000018952340

OEPAKATENA STATE BIVISION OF CORPORATIONS TALLAHASSEE, FI ORIDA

03 HAY 19 PH 2: 14 RECEIVED

	ACCOUNT NUMBER: REFERENCE: (Sub Account) DATE: REQUESTOR 'NAME:	20 39 5/19		-	
	ADDRESS:	1			
	TELEPHONE: (.) ()	ext (- _) -
(CORPORĂTION NAHE:	_ Holidas	y Village,	L.P.	
(OCUMENT NUMBER: (if applicable) OUTHORIZATION:	Cynalia	1. Wo-o.	- duard	amend.
<u> </u>	CERTIFIED CON CERTIFICATE OF PLAIN STAMPER	OF STATUS (1			· ·
((() Call When Rea) Walk In) Hail Out	dy ()	Call if Pro Will Wait	blom (FILED FILED AND STATE AND

CERTIFICATE OF AMENDMENT TO APPLICATION FOR REGISTRATION OF

Holiday Village, G.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 nereby submits this certificate of amendment to its registration application:
The registration application is amended as follows: The name and business address of the general partner is: MHC Holiday Village Two, L.L.C. located at Two North Riverside Plaza, Suite 800, Chicago, Illinois 60606.
MHC Holiday Village Two, L.L.C. M02-629 By: MHC Operating Limited Partnership, its managing member By: Manufactured Home Communities, Inc., its general partnership: By: Manufacture of a General Partner)
Name: BY: DAVID 11) Fell (Typed or printed name of General Partner signing above) Title: VKE President STATE OF FUNDIS
COUNTY OF COOK
On this 16 day of MAy, 2003, Davin W. Fell personally appeared before me, Who is personally known to me
whose identity I proved on the basis of
Susan Kolly (Notary Public Signature)
Susan L. Jeffrey (Notary's Printed Name)
Seal My Commission Expires: 08 01 05

FL050 - 12/16/2002 C T System Online

MY COMMISSION EXPINES:08/01/06