

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations Fax Number : (850)617-6380

From:

Account Name Account Number	C T CORPORATION FCA00000023	SYSTEM
Phone Fax Number	(850)205-8842 (850)878-5368	

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

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5/1/2015

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5/1/2015 10:45:44 AN From: To: 8506176380( 2/4 )

## **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: IA Communities Third Party, Inc.

Name of Corporation

DOCUMENT NUMBER: F13000005551

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kim Band

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Name of Contact Person

InvenTrust Properties Corp.

Firm/Company

2809 Butterfield Road

Address

Oak Brook, IL 60523

City/State and Zip Code

kim.band@inventrustproperties.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

 Kim Band
 at (630)
 570-0854

 Name of Contact Person
 Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

\$35.00 Filing Fee

S43.75 Filing Fee & Certificate of Status S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee. Certificate of Status & Certified Copy (Additional copy is enclosed)

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 5/1/2015 10:45:44 AM From: To: 8506176380( 3/4 )

## PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA (Pursuant to s. 607.1504, F.S.)

(Fut subtrit to 5, 007,1204, 1.5.)

## SECTION I (1-3 MUST BE COMPLETED)

F13000005551

(Incorporated under laws of)

(Document number of corporation (if known)

1. IA Communities Third Party, Inc.

(Name of corporation as it appears on the records of the Department of State)

2. Delaware

2

3 12/30/2013

(Date authorized to do business in Florida)

## SECTION II (4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, wh	hen was the change effected under the laws o	of James
its jurisdiction of incorporation? 05/01/2015	<u>-</u>	ts jitris 1
5. University House Communities Third Party, Inc.		
(Name of corporation after the amendment, adding suffix appropriate abbreviation, if not contained in new name o	"corporation," "company," or "incorporated, f the corporation)	, or
	≥斧	35
(If new name is unavailable in Florida, enter alternate corp- business in Florida)	orate name adopted for the purpose of transa	
6. If the amendment changes the period of duration, indicate	new period of duration.	
(New dura		ů,
7. If the amendment changes the jurisdiction of incorporation	n, indicate new jurisdiction.	
(New jurisd	iction)	
8. Attached is a certificate or document of similar import, ev 90 days prior to delivery of the application to the Departm having custory of corporate records in the jurisdiction und	idencing the amendment, authenticated not r ent of State, by the Secretary of State or othe ter the laws of which it is incorporated.	nore than er official
(Signature of a director, president or other officer - if in the has of a receiver other court appointed fiduciary, by that fiduci		
Jack H. Potts	Secretary	
(Typed or printed name of person signing)	(Title of person signing)	

5/1/2015 10:45:44 AM From: To: 8506176380( 4/4 )

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "IA COMMUNITIES THIRD PARTY, INC.", PILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "UNIVERSITY HOUSE COMMUNITIES THIRD PARTY, INC.", THE FIRST DAY OF MAY, A.D. 2015, AT 8:32 O'CLOCK A.M.

• ;



w W. Builoci of State TION: 2339576 AUTHENTIC

DATE: 05-01-15

4343470 8320

150597173 You may verify this certificate online at corp.delewere.gov/authwar.shtml