

M0600000924

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

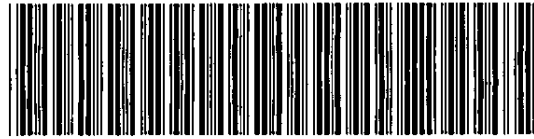
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA
15 MAY 19 AM 10:28

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16 MAY 19 PM 4:20

MAY 20 2016

S. YOUNG

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 144616 4321061
AUTHORIZATION : *Lyndell E. ...*
COST LIMIT : \$ 25.00

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SECRETARY OF FLORIDA
TALLHASSEE, FL 32301
16 MAY 19 11:10:28

ORDER DATE : May 17, 2016
ORDER TIME : 3:30 PM
ORDER NO. : 144616-080
CUSTOMER NO: 4321061

FOREIGN FILINGS

NAME: ZEPHYRHILLS APARTMENT
ASSOCIATES, LLC

CORPORATE
 LIMITED PARTNERSHIP
 LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER: _____

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: Zephyrhills Apartment Associates, LLC

Enter new principal office address, if applicable: _____

(Principal office address
MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: _____

(Mailing address
MAY BE A POST OFFICE BOX)

2. The Florida document number of this limited liability company is: M06000000924

3. Jurisdiction of its organization: Georgia

4. Date authorized to do business in Florida: February 17, 2006

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: _____
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida Street Address

_____, Florida _____

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

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7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

Delaware

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
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_____	_____	_____	<input type="checkbox"/> Remove

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9. Attached is a certificate, if required: no more than 90 days old, 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.


Signature of the authorized representative

Bret L. Block, Organizer

Typed or printed name of signee

Filing Fee: \$25.00

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF CONVERSION OF A GEORGIA LIMITED LIABILITY COMPANY UNDER THE NAME OF "ZEPHYRHILLS APARTMENT ASSOCIATES, LLC" TO A DELAWARE LIMITED LIABILITY COMPANY, FILED IN THIS OFFICE ON THE SEVENTEENTH DAY OF MAY, A.D. 2016, AT 2:24 O`CLOCK P.M.

16 MAY 19 AM 10:28
I LEED STATE
SECRETARY OF FLORIDA
TFL AM/SS/EE/FLORIDA




Jeffrey W. Bullock, Secretary of State

6044465 8100F
SR# 20163310405

Authentication: 202334993
Date: 05-17-16

You may verify this certificate online at corp.delaware.gov/authver.shtml

State of Delaware
Secretary of State
Division of Corporations
Delivered 02:24 PM 05/17/2016
FILED 02:24 PM 05/17/2016
SR 20163310405 - FileNumber 6044465

STATE OF DELAWARE
CERTIFICATE OF CONVERSION
FROM A NON-DELAWARE LIMITED LIABILITY COMPANY TO
A DELAWARE LIMITED LIABILITY COMPANY PURSUANT TO
SECTION 18-214 OF THE LIMITED LIABILITY ACT

- 1.) The jurisdiction where the Non-Delaware Limited Liability Company first formed is Georgia.
- 2.) The jurisdiction immediately prior to filing this Certificate is Georgia.
- 3.) The date the Non-Delaware Limited Liability Company first formed is December 8, 2004.
- 4.) The name of the Non-Delaware Limited Liability Company immediately prior to filing this Certificate is Zephyrhills Apartment Associates, LLC.
- 5.) The name of the Limited Liability Company as set forth in the Certificate of Formation is Zephyrhills Apartment Associates, LLC.

FILED STATE
SECRETARY OF STATE
MAY 17 2016
16 MAY 19 AM 10:28

IN WITNESS WHEREOF, the undersigned have executed this Certificate on the
16th day of May, A.D. 2016.

By: 
Authorized Person

Name: Bret L. Block, Organize
Print or Type

Delaware


The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE DO HEREBY CERTIFY THAT THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF FORMATION OF "ZEPHYRHILLS APARTMENT ASSOCIATES, LLC" FILED IN THIS OFFICE ON THE SEVENTEENTH DAY OF MAY, A.D. 2016, AT 2:24 O'CLOCK P.M.

11 DEPT STATE
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 MAY 19 AM 10:28




Jeffrey W. Bullock, Secretary of State

6044465 8100F
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Authentication: 202334993
Date: 05-17-16

You may verify this certificate online at corp.delaware.gov/authver.shtml

STATE of DELAWARE
LIMITED LIABILITY COMPANY
CERTIFICATE of FORMATION

First: The name of the limited liability company is Zephyrhills Apartment Associates, LLC


Second: The address of its registered office in the State of Delaware is 2711 Centerville Road, Suite 400 in the City of Wilmington
Zip code 19808. The name of its Registered agent at such address is Corporation Service Company

Third: (Use this paragraph only if the company is to have a specific effective date of dissolution: "The latest date on which the limited liability company is to dissolve is _____.")

Fourth: (Insert any other matters the members determine to include herein.)

In Witness Whereof, the undersigned have executed this Certificate of Formation this

16th day of May, 2016

By: 

Authorized Person (s)

Name: Bret L. Block, Organizer

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