Division of Corporations Electronic Filing Cover Sheet

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(((H090002450743)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: C T CORPORATION SYSTEM Account Name

Account Number : FCA000000023 Phone

: (850)222-1092

Fax Number

: (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, **

LLC AMND/RESTATE/CORRECT OR M/MC RESIGN CVS 8902 FL, L.L.C.

Certificate of Status	0
Certified Copy	U
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

T. HAMPTON

NOV 2 3 2009

EXAMINER

11/20/2009

COVER LETTER

*

TO:	Registration Section Division of Corporations	
SUBJ		VS 8902 FL, L.L.C.
	Name of Fore	ign Limited Liability Company
Dear S	ir or Madam:	
The en	closed application, certificate and fee(e) are submitted for filing.
Please	return all correspondence concorning t	his matter to the following:
	Olga Hinkel	·
	Name of Person	
	CT Corporation System	
	Firm/Company	
	155 Federal Street	
<u> </u>	Address	
	Boston MA 02110	•
	City/State and Zip Coo	de
,	nikluker@cvs.com	•
E-ma	il address: (to be used for future annua	l report notification)
or furt	her information concerning this matter	, please call:
	Melanie Luker	at (401) 770-3565
	Name of Person	Area Code & Daytime Telephone Number
	STREET/COURIER ADDRESS:	MAILING ADDRESS:
	Registration Section	Registration Section
	Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327
	2661 Executive Center Circle	Tallahassee, Florida 32314
	Tallahassee, Florida 32301	•
	d is a check for the following amountiling Fee \$\sum \text{S30 Filing Fee & Certificate of Status}	t: \$\int_\$\$55 Filing Fee & \$\int_\$\$60 Filing Fee, Certified Copy Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-3 must be completed)

ł	Name of limited liability company as it appears on the records of the Florida Department of State: CVS 8902 FL, L.L.C.
2	Jurisdiction of its organization: DE
3.	Date authorized to do business in Florida: 7/9/2008
	SECTION II (4-7 complete only the applicable changes)
4,	If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization? 11/12/2009
5	New name of the limited liability company: Town Center Realty Parmers, LLC
٧.	(must end with "Limited Liability Company," "L.L.C.," or "LLC.")
the	orida and attach a copy of the written consent of the managers or managing members adopting a alternate name. The alternate name must end with "Limited Liability Company," "L.L.C." "LLC.") If the amendment changes the period of duration, indicate new period of duration: 1/4
	If the amendment changes the jurisdiction of organization, indicate new jurisdiction:
	If the amendment corrects any false statement, indicate the statement being corrected and the correction: n/a
	Attached is an original certificate, 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.

Filing Fee: \$25.00

Melanie K Luker, Asst Secretary of Member Typed or printed name of signee SECRETARY OF STATE
IVISION OF CORPORATIONS

Delaware

PAGE

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "CVS 8902 FL, L.L.C.", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "TOWN CENTER REALTY PARTNERS, LLC", THE TWELFTH DAY OF NOVEMBER, A.D. 2009, AT 6:11 O'CLOCK P.M.

4565521 8320

091033697

You may verify this certificate online

AUTHENTICATION: 7652964

DATE: 11-19-09