

M10000004422

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

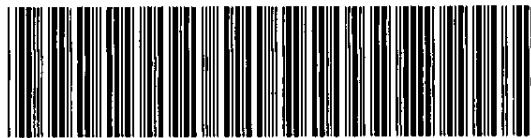
(Document Number)

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D. BRUCE
FEB 16 2011
EXAMINER



700193467027

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2011 FEB 16 PM 1:39
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SUFFICIENCY OF FILING

FILED
11 FEB 16 PM 3:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 677190 4321791

AUTHORIZATION : *[Signature]*

COST LIMIT : \$ 25.00

ORDER DATE : February 16, 2011

ORDER TIME : 1:11 PM

ORDER NO. : 677190-010

CUSTOMER NO: 4321791

FOREIGN FILINGS

NAME: RELATED BEACON ISLES, 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: Matthew Young -- EXT# 2962

EXAMINER: _____

FILED
 11 FEB 16 PM 3:32
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

**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)

1. Name of limited liability company as it appears on the records of the Florida Department of State: Related Beacon Isles, LLC
2. Jurisdiction of its organization: Delaware
3. Date authorized to do business in Florida: October 7, 2010

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? February 11, 2011
5. New name of the limited liability company: Related Isles Apartments, LLC
(must end with "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 end with "Limited Liability Company," "L.L.C." or "LLC.")

6. If the amendment changes the period of duration, indicate new period of duration:

N/A

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

N/A

8. If the amendment corrects any false statement, indicate the statement being corrected and the correction: N/A

9. 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.

M H Orbison
Signature of a member or the authorized representative of a member

Michael H. Orbison, Authorized Person

Typed or printed name of signee

Filing Fee: \$25.00

SECRETARY OF STATE
TALLAHASSEE FLORIDA

11 FEB 16 PM 3:32

FILED

Delaware

PAGE 1

The First State

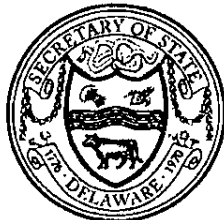
I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "RELATED BEACON ISLES, LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "RELATED ISLES APARTMENTS, LLC", THE ELEVENTH DAY OF FEBRUARY, A.D. 2011, AT 6:13 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

4875448 8320

110165354

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




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 8564231

DATE: 02-16-11