

#11/27/2011 7:58 From T: 850 617 6383 (1/3)
Division of Corporations Page 1 of 1
#M12000004231

Florida Department of State
Division of Corporations
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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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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
FLORIDA CITY LEASED HOUSING ASSOCIATES SLP I, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
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K. SALLY
EXAMINER
JAN 30 2014

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Florida City Leased Housing Associates SLP I, LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

John Nolde

Name of Person

Winthrop & Weinstine, P.A.

Firm/Company

225 South Sixth Street, Suite 3500

Address

Minneapolis, MN 55402

City/State and Zip Code

jnolde@winthrop.com

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

For further information concerning this matter, please call:

John Nolde

Name of Person

at 612 , 604-6400

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☒ \$55 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

CR2E055 (12/13)

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY 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: Florida City Leased Housing Associates SLP I, LLC
2. Jurisdiction of its organization: Minnesota
3. Date authorized to do business in Florida: July 25, 2012

SECTION II (4-7 complete only the applicable changes)

4. 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.")

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

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

David L. Brierton and Jack W. Safar are removed as Managers of the entity.

7. Attached is an original 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

Mark S. Moorhouse

Typed or printed name of signer

Filing Fee: \$25.00

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