

M13000002074

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

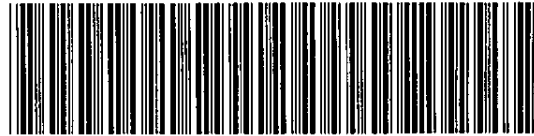
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400260853384

06/05/14--01003--016 \*\*60.00

FILED

2014 JUN -4 AM 9:30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED

14 JUN -4 PM 4:35

DEPARTMENT OF REVENUE

N. Gulligan JUN -5 2014

CORP DIRECT AGENTS, INC. (formerly CCRS)  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301  
222-1173

**FILING COVER SHEET**  
**ACCT. #FCA-23**

**CONTACT:** Kim Weidenbach

**DATE:** 06/04/14

**REF. #:** 9166827

**CORP. NAME:** BOYNTON BEACH MULTIFAMILY PARTNERS, LLC changing its name to: SAFETY HARBOR MULTIFAMILY PARTNERS, LLC

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> ARTICLES OF INCORPORATION   | <input checked="" type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT               | <input type="checkbox"/> TRADEMARK/SERVICE MARK           | <input type="checkbox"/> FICTITIOUS NAME         |
| <input type="checkbox"/> FOREIGN QUALIFICATION       | <input type="checkbox"/> LIMITED PARTNERSHIP              | <input type="checkbox"/> LIMITED LIABILITY       |
| <input type="checkbox"/> REINSTATEMENT               | <input type="checkbox"/> MERGER                           | <input type="checkbox"/> WITHDRAWAL              |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION |   |  |
| <input type="checkbox"/> OTHER:                      |   |  |

**STATE FEES PREPAID WITH CHECK#** 70021377 **FOR \$** 60.00

**AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:**

\_\_\_\_\_ **COST LIMIT: \$** \_\_\_\_\_

**PLEASE RETURN:**

- |  |  |   |
|--|--|---|
| <input checked="" type="checkbox"/> CERTIFIED COPY | <input checked="" type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS     |  |   |

Examiner's Initials

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Boynton Beach Multifamily Partners, 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:

Govan D. White

Name of Person

Boynton Beach Multifamily Partners, LLC

Firm/Company

4515 Harding Road, Suite 210

Address

Nashville, Tennessee 37205

City/State and Zip Code

gwhite@covenantcapgroup.com

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

For further information concerning this matter, please call:

Govan D. White

Name of Person

at ( 615 ) 250-1616

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)**

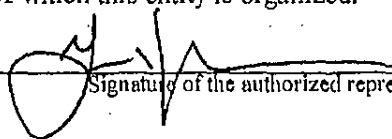
1. Name of limited liability Company as it appears on the records of the Florida Department of State: Boynton Beach Multifamily Partners, LLC
2. Jurisdiction of its organization: Delaware
3. Date authorized to do business in Florida: April 2, 2013

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

4. New name of the limited liability company: Safety Harbor Multifamily Partners, LLC  
(must contain "Limited Liability Company," "LLC," 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," "LLC," 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: \_\_\_\_\_  
\_\_\_\_\_
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

Govan D. White

\_\_\_\_\_  
Typed or printed name of signee

**Filing Fee: \$25.00**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2014 JUN -4 AM 9:30

FILED

# Delaware

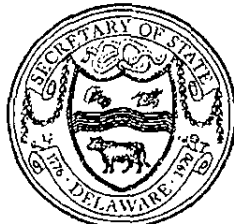
PAGE 1

## *The First State*

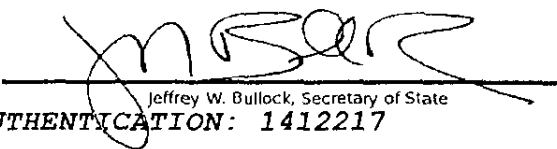
I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "BOYNTON BEACH MULTIFAMILY PARTNERS, LLC", CHANGING ITS NAME FROM "BOYNTON BEACH MULTIFAMILY PARTNERS, LLC" TO "SAFETY HARBOR MULTIFAMILY PARTNERS, LLC", FILED IN THIS OFFICE ON THE TWENTY-EIGHTH DAY OF MAY, A.D. 2014, AT 9:51 O'CLOCK A.M.

5291014 8100

140725308



You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 1412217

DATE: 05-30-14

State of Delaware  
Secretary of State  
Division of Corporations  
Delivered 10:08 AM 05/28/2014  
FILED 09:51 AM 05/28/2014  
SRV 140725308 - 5291014 FILE

## STATE OF DELAWARE CERTIFICATE OF AMENDMENT

1. Name of Limited Liability Company: Boynton Beach Multifamily Partners, LLC
2. The Certificate of Formation of the limited liability company is hereby amended as follows:

The name of the limited liability company is hereby amended from "Boynton Beach Multifamily Partners, LLC" to "Safety Harbor Multifamily Partners, LLC" throughout the document.

IN WITNESS WHEREOF, the undersigned have executed this Certificate on the 28th day of May, A.D. 2014.

By: Philip F. Head  
Authorized Person(s)

Name: Philip F. Head  
Print or Type