### Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN THREE LAKES APARTMENTS, LLC

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June 19, 2015

#### FLORIDA DEPARTMENT OF STATE

Division of Corporations

THREE LAKES APARTMENTS, LLC 477 SOUTH ROSEMARY AVENUE SUITE 301

WEST PALM BEACH, FL 33401

SUBJECT: THREE LAKES APARTMENTS, LLC

REF: M14000007875

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

NEED PROOF FROM HOME STATE OF NAME CHANGE

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered shandoned.

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Stacey M Mason Regulatory Specialist II FAX Aud. #: H15000150371 Letter Number: 815A00012886

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P.O BOX 6327 - Tallahassee, Florida 32314

SECRETARY OF STATE

SECRETARY OF STATE

	COV	EK LETT	EK				
TO: Registration S Division of C							
SUBJECT: Thre	e Lakes Apartm	ents, LL	С				
	Name of Foreign	Limited Liabi	lity Comp	pany			
Dear Sir or Madam:							
The enclosed applicat	ion, certificate and fee(s) a	re submitted fo	or filing.				
Please retugo all corre	spondence concerning this	matter to the f	gaiwollo	• •			
Kristi Dickisc	on						
	Name of Person						
Broad and C	assel						
	Firm/Company						
390 N. Oran	ge Avenue Suite	e 1400					
	Address						
Orlando, Flo	rida 32801	•					
Onando, 110	City/State and Zip Code						
hahant@idfl							
behant@jdfla E-mail address: (to	be used for future annual	report notificat	ion)				
	•		,				
	on concerning this matter, p	olease call:					VIE.
Kristi Dickiso	on	at (407	<u>481-</u>	-5263	74. 136.	C.	SIC
Name	of Person	Area Code	& Daytin	ne Telephone Number	AHA	JUN 22	N O
STREET/CO Registration S Division of C Clifton Buildi	orporations		Registi Divisio	ING ADDRESS: ration Section on of Corporations ox 6327	ARY OF STA	22 PH 12: 27	F CURPORAT
	ve Center Circle			assee, Florida 32314	ŠĦ	27	SHOHA
Enclosed is a check t  \$25 Filing Fee	for the following amount:  \$\square\$ \$30 \text{ Filing Fee & Certificate of Status}\$	□ \$55 Filing Certified (		□ \$60 Filing Fee, Certificate of Stat Certified Copy	us &		

#### 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	f	
State: Three Lakes Apartments, LLC		
2. The Florida document number of this limited liability company is: M14000007875		* # ** W \ **** \
3. Jurisdiction of its organization: Delaware		
4. Date authorized to do business in Florida: October 29, 2014		
SECTION II (5-9 complete only the applicable changes)		
5. New name of the limited liability company: Richman Three Lakes Development Partners, LLC		
(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.")	a	
6. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:	o <u>f</u>	
Name of New Registered Agent:		
New Registered Office Address:		
Enter Florida Street Address		
, Florida		
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 agreemply 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.	he 5	SECRE SECRE
If Changing Registered Agent, Signature of New Registered Agent	JUN 22	유독규
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:	2 PH 12: 6	RY OF STATE
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Title/ Capacity	<u>Name</u>	<u>Address</u>	Type of Action
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Typed or printed name of signee

Kristin M. Miller

unature of the authorized representative

Filing Fee: \$25.00

15 JUN ZZ PHIZ: ZI

SECRETARY: OF STATE
SECRETARY: OF STATE

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### Delaware

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED ARE TRUE AND CORRECT COPIES OF ALL DOCUMENTS ON FILE OF "RICHMAN THREE LAKES DEVELOPMENT PARTNERS, LLC" AS RECEIVED AND FILED IN THIS OFFICE.

THE FOLLOWING DOCUMENTS HAVE BEEN CERTIFIED:

CERTIFICATE OF CONVERSION, CHANGING ITS NAME FROM "THREE LAKES SEDONA REVERSE 1031, LLC" TO "THREE LAKES APARTMENTS, LLC", FILED THE TWENTY-EIGHTH DAY OF OCTOBER, A.D. 2014, AT 2:06 O'CLOCK P.M.

CERTIFICATE OF FORMATION, FILED THE TWENTY-EIGHTH DAY OF OCTOBER, A.D. 2014, AT 2:06 O'CLOCK P.M.

CERTIFICATE OF AMENDMENT, CHANGING ITS NAME FROM "THREE LAKES APARTMENTS, LLC" TO "RICHMAN THREE LAKES DEVELOPMENT PARTNERS, LLC", FILED THE TWELFTH DAY OF JUNE, A.D. 2015, AT 12:20 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CERTIFICATES ARE THE ONLY CERTIFICATES ON RECORD OF THE AFORESAID LIMITED LIABILITY COMPANY, "RIGHMAN THREE LAKES DEVELOPMENT PARTNERS, LLC".

You may varify this cestificate online t corp. delaware. gov/authver. shtml

DATE: 06-18-15

State of Delaware Secretary of State Division of Couporations Delivered 02:12 PM 10/28/2014 FILED 02:05 PM 10/28/2014 SRV 141342815 - 5529175 FILE

# 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 DELAWARE LIMITED LIABILITY COMPANY ACT

- 1. ... The jurisdiction where the Non-Delaware Limited-Liability Company first formed is ---- Florida.
- 2. The jurisdiction immediately prior to filing this Certificate is Florida.
- 3. The date the Non-Delaware Limited Liability Company first formed is July 22, 2014.
- 4. The name of the Non-Delaware Limited Liability Company immediately prior to filing this Certificate is Three Lakes Sedona Reverse 1031, LLC.
  - The name of the Limited Liability Company as set forth in the Certificate of Formation (being filed simultaneously berewith) is Three Lakes Apartments, LLC.

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Conversion on October 28, 2014.

THREE LAKES MEMBER, LLC, a Deloware limited liability company,

its Managera

Name: William T. Fabbri

Its: Executive Vice President

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State of Dalaware Secretary of State Division of Corporations Delivered 02:12 PM 10/28/2014 FILED 02:06 PM 10/28/2014 SRV 141342813 - 5629175 FILE

#### STATE OF DELAWARE CERTIFICATE OF FORMATION or THREE LAKES APARTMENTS, LLC

The undersigned, desiring to form a limited liability company pursuant to the Delaware Limited Liability Company Act, 6 Delaware Code, Chapter 18, does hereby certify as follows:

First:

The name of the limited liability company is Three Lakes Apartments,

Second:

The name and address of the registered agent of the limited liability

company in the State of Delaware is:

National Corporate Research, Ltd. 615 South Dupont Highway Dover, Delaware 19901

Kent County

Third:

The limited liability company's initial principal office and mailing address

is to be located at:

477 South Rosemary Avenue

Suite 301

West Palm Beach, Fiorida 33401

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Formation on October 28 , 2014.

> THREE LAKES MEMBER, LLC, a Delaware lighted Hability company,

its Manager

By: William T. Pabbri

Namo:\_ Executive Vice President

(843-7366-7567 ( 1555-78157

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State of Delaware Secretary of State Division of Corporations Delivered 12:20 Pt 06/12/2015 FILED 12:20 Pt 06/12/2015 SRV 150915100 - 5629175 FILE

2.

### STATE OF DELAWARE CERTIFICATE OF AMENDMENT

The Certificate of Formation of the limited liability company is hereby amended is follows:  The name of the limited liability company is Richman Three Lakes Development Partners. LLC  N WITNESS WHEREOF, the undersigned have executed this Certificate on the 12th day of June , A.D. 2015.  By:	Name of Limited Liability Company: Three Lakes Apartments, LL	<u></u>
Three Lakes Development Partners. LLC  N WITNESS WHEREOF, the undersigned have executed this Certificate on the 12th day of June , A.D. 2015.  By: Authorized Person(s)		ed
By: Authorized Person(s)		
W Authorized Person(s)		<u> </u>
Name: Kristin M. Miller		
Print or Type		

## Delaware

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO"HEREBY CERTIFY "RICHMAN-TRREE LAKES DEVELOPMENT .... .... PARTNERS, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTEENTH DAY OF JUNE, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RICHMAN THREE LAKES DEVELOPMENT PARTNERS, LLC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF OCTOBER, A.D. 2014.

5629175 8300

150940901

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

DATE: 06-18-15