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Form 19905
(Rev. Jan. 1999)

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Filing Fee \$25

25.00

C LP-10.6

SUBMIT IN DUPLICATE!

8519/0023 88 001 Page 1 of 2 1999-10-21 16:44:29 Cook County Recorder 23.00



All corespondence regarding the filing will be sent to the registered agent of the limited partnership unless a salf-addressed envelope with pre-paid postage is included.

JESSE WHITE SECRETARY OF STATE STATE OF ILLINOIS

CERTIFICATE OF AMENDMENT
TO THE APPLICATION FOR ADMISSION
(foreign limited partnership)

1.	Limited	partnership's name: Garden Tenglewood L.P.					
2.	File nu	ile number assigned by the Secretary of State: S006716					
3.		ral Employer Identification Number (F.E.I.N.): 36-3852699					
4. Admitting name or assumed name, if any, under which the limited partnership is transacting business in Illinoi							
		N/A					
5.	The application for admission to transact business is amended as follows: (Check all applicable changes here and specify them in item 6.) (Address changes - P.O. Box alone and c/o are unacceptable)						
\	· <u>'x</u> a)	Admission of a new general partner (give name and business address in item 6 on severse).					
\	<u>_x</u> b)	 Withdrawal of a general partner (give name in item 6 on reverse). Change of registered agent and/or registered agent's office (give new name and address, including county in item 6 on reverse). 					
	c)						
	∵ x − d)	Change in the address of the office at which the records required by Section 902 of the Act are kept (give new address. Including county, in item 6 on reverse).					
	— е)	Change in the general partners name and/or pusiness address (give name and new address in item 6 on reverse).					
	f) Change in limited partnership's name (give new name in item 6 on reverse).						
	g) Change in date of dissolution (give new date in item 6 on reverse).						
h) Other (give information in item 6 on reverse).							
		d. 10670 N. Central, #600, Dallas, TX 75321					

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Form LP 905 (Rev. Jan. 1999)

Telephone: (217) 785-8960

http://www.sos.state.il.us

LPR310/13/39:01:5661:

25.00 MU

SOSIL S006716 FILED 905

If additional space is needed, it must be continued in the same format on a plain white 8 1/2" x 11" sheet, which must be stapled to this form. Withdrawing CP: Carden Capital. Incorporated

10670 N. Central, #600, Dallas, TX 75321

6. NAME(S) & BUSINESS ADDRESS(ES) OF GENERAL PARTNER(S) New CP: Garden National Realty, Inc.

10670 N. Central, #600, Dallas, TX 75321

The undersigned affirms, under penalties of perjury, that the facts stated herein are true.

The original certificate of amendment must be signed by a general partner, all new general partners and at least one withdrawing general partner.

SIGNATURE AND NAME		BUSINESS AD	DRESS	
1. Signature W. Davi	Street	10670 N.	Central #6	00
Type or print name and title Cheryl Weaver	City/town _	Dallas,		
Name of General Partner if a corporation or	0,			
other entity Garden National Realty, Inc.	Sial's	Texas	ZIP Code _	75231
2. Signature / // /	Street	106704N.	Central	
Type or print name and title TEUEN X	City/town _	vallas		
Name of General Partner if a corporation or UIC VIE	<u> </u>			
other entity Garden Capital Incorporated	State	Texas S	ZIP Code _	75231
3. Signature	Street	·	1/2	
Type or print name and title	City/town _		90	
Name of General Partner if a corporation or				
other entity	State		ZIP Code _	
(Signatures must be in <u>BLACK INK</u> on an original document. Obe used on conformed copies.)	Carbon copy, (photocopy or rubber	r stamp signatu	es may only
RETURN TO:				
Secretary of State				
Department of Business Services Limited Partnership Division				
Room 357, Howlett Building				
Springfield, Illinois 62756			DAW a	49 1 A

DO NOT SEND CASH!

BOX 170