

**STATE OF SOUTH CAROLINA
SECRETARY OF STATE**

**AMENDMENT OF CERTIFICATE OF LIMITED PARTNERSHIP
LIMITED PARTNERSHIP – DOMESTIC**

Pursuant to Section 33-42-220 of the 1976 S.C. Code of Laws, as amended, the limited partnership submits the following:

1. The name of the limited partnership is:

Villas at Iris Apartments, LP

2. The assumed name of the limited partnership is:

3. The limited partnership is organized under the laws of South Carolina. The original certificate of limited partnership was issued on this date: 05/14/2024

4. The registered office of the limited partnership is:
508 Meeting Street

(Street Address)

West Columbia, South Carolina 29169

(City, State, Zip Code)

and the registered agent at such address is:

Corporation Service Company

(Name)

5. The address of the principal office is:
401 Wilshire Blvd., 11th Floor

(Street Address)

Santa Monica, California 90401

(City, State, Zip Code)

6. Enter the complete text of each amendment. If the space on this form is not sufficient, please attach additional pages containing a reference to this section.

Amended Entity Name: Pulaski Place Apartments, LP
Additional Amendment: Section 1 of the Certificate of Limited Partnership is hereby deleted and replaced with the following "The name of the limited partnership is: "Pulaski Place Apartments, LP".

Villas at Iris Apartments, LP

Name of Limited Partnership

7. These amendments to the certificate of limited partnership shall begin as of the filing date with the Secretary of State unless a delayed time is indicated. _____

Date 04/21/2025

Signed as Filer: Thom Amdur : (Electronically Signed)

(Signature of General Partner)

Fairview Pulaski Place GP LLC

(Print Name)

Business Name: Pulaski Place Apartments, LP

Signature Page for a Secretary of State Business Filing

This page must be completed, scanned, and attached to any business filing where one of the following is true.

- The filing party signs the digital form on behalf of official signee.
- An attorney's signature is required. (Articles of Incorporation for Corporation and Benefit Corporation)

Official Signatures

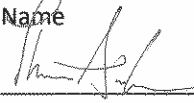
(Officer, Incorporator, Director, Agent, Partner, etc)

Required for forms where the signee is not present upon online submission and a filing party is providing a digital signing on their behalf. If the provided space is not enough, please attach multiple pages.

Thom Amdur

4/17/25

Name



Executive Director of Fairview Housing Partners Ltd.,
the sole member and manager of Fairview Pulaski Place GP LLC, General Partner

Date

Signature

Title / Position

Name

Date

Signature

Title / Position

Name

Date

Signature

Title / Position

Name

Date

Signature

Title / Position

Name

Date

Signature

Title / Position

Scan and Upload this document to the Business Filing System during the filing process.
File must be PDF format.