

AD20000000869

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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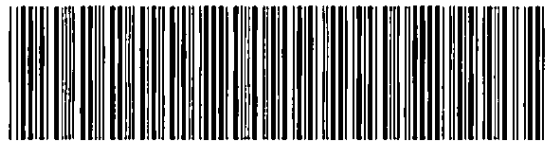
(Business Entity Name)

(Document Number)

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S. PRATHER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CSR Ocala, Ltd.

Name of Florida Limited Partnership or Limited Liability Limited Partnership

The enclosed Certificate of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Nichol Cox

Contact Person

Root Company

Firm/Company

275 Clyde Morris Blvd

Address

Ormond Beach, FL 32174

City, State and Zip Code

nichol@rootorg.com

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

For further information concerning this matter, please call:

Nichol Cox

at (386) 671-4915

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$52.50 Filing Fee

☐ \$61.25 Filing Fee
and Certificate of
Status

☐ \$105.00 Filing Fee
and Certified Copy

☐ \$113.75 Filing Fee,
Certified Copy, and
Certificate of Status

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**CERTIFICATE OF AMENDMENT
TO
CERTIFICATE OF LIMITED PARTNERSHIP
OF**

CSR Ocala, Ltd.

Insert name currently on file with Florida Department of State

Pursuant to the provisions of section 620.1202, Florida Statutes, this Florida limited partnership or limited liability limited partnership, whose certificate was filed with the Florida Department of State on June 24, 2002, assigned Florida document number A02000000869, adopts the following certificate of amendment to its certificate of limited partnership.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited partnership or limited liability limited partnership here:

New name must be distinguishable and contain an acceptable suffix.

Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.

Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.

B. If amending mailing address and/or principal office address, enter new mailing address and/or principal office address here:

New Principal Office Address:

(Must be *STREET* address)

New Mailing Address:

(May be post office box)

C. 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:

Name of New Registered Agent:

Gregory S. Radikopf

New Registered Office Address:

275 Clyde Morris Blvd

Enter Florida street address

Ormond Beach

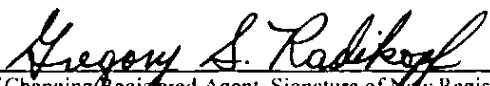
City

Florida 32174

Zip Code

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 agree to comply 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.


If Changing Registered Agent, Signature of New Registered Agent

D. If amending the general partner(s), enter the name and business address of each general partner being added or removed from our records:

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
GP	RDT, L.L.C.	275 Clyde Morris Blvd Ormond Beach, FL 32174	☐ Add ☒ Remove
GP	RDT, LLC	275 Clyde Morris Blvd Ormond Beach, FL 32174	☒ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

E. If the limited partnership or limited liability limited partnership is amending its "limited liability limited partnership" status, enter change here:

- ☐ This Limited Partnership hereby elects to be a "Limited Liability Limited Partnership."
- ☐ This Limited Partnership hereby removes its "Limited Liability Limited Partnership" status.

(NOTE: *If adding or removing "limited liability limited partnership" status, all general partners must sign this amendment.)*

F. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

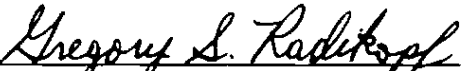
Effective date, if other than the date of filing: _____

(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Signature(s) of a general partner or all general partners*:

(*NOTE: Only one current general partner is required to sign this document unless the limited partnership is adding or removing a "limited liability limited partnership" election statement. Chapter 620, F.S., requires all general partners to sign when adding or removing a "limited liability limited partnership" election statement.)



Gregory S. Radikopf, Treasurer of Root Real Estate Corp.

Signature(s) of all new or dissociating general partner(s), if any:



Donna M. Bartholomew, Manager of RDT, L.L.C.



Donna M. Bartholomew, Manager of RDT, LLC

Filing Fee: \$52.50
Certified Copy (optional): \$52.50
Certificate of Status (optional): \$8.75



275 Clyde Morris Boulevard
Ormond Beach, Florida 32174
Tel 386 671 4888
Fax 386 671 3888

March 18, 2025

Registration Section
Division of Corporations – State of Florida
PO Box 6327
Tallahassee, Florida 32314

Re: Certificate of Amendment to Certificate of Limited Partnership
CSR Ocala, Ltd.

To whom it may concern:

Please find enclosed our completed copy of the Certificate of Amendment to Certificate of Limited Partnership for CSR Ocala, Ltd. requesting the change of one of the listed General Partners of this entity, and a correction to the Registered Agent's name.

CSR Ocala, Ltd.
Document # A02000000869

Current GP: RDT, L.L.C., L.C
Document #M94000000022

New GP: RDT, LLC
Document #L22000279687

Current RA: Gregory S. Treasurer Radikopf
New RA: Gregory S. Radikopf

Also enclosed is check # 000340 in the amount of \$52.50 for the required filing fee.

If you have any questions or need additional information, please do not hesitate to contact me directly at 386-671-4915.

Sincerely,

Nichol Cox
Executive Administrative Assistant