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## **COVER LETTER**

TO:

**Registration Section Division of Corporations** 

Tallahassee, FL 32314

Colle SUBJECT:	ge Park Propertie	es, LLC		
		Name of Lin	nited Liability Company	
The enclosed Artic	les of Amendmer	nt and fee(s) are sub	omitted for filing.	
Please return all co	orrespondence cor	ncerning this matter	to the following:	
	Geoffr	ey D. Goldman		
	<del></del>		Name of Person	
	College	Park Properties, I.	LC	
	Name of Limited Liability Company  les of Amendment and fee(s) are submitted for filing.  Trespondence concerning this matter to the following:  Geoffrey D. Goldman  Name of Person  College Park Properties, LLC  Firm/Company  1801 Pepperidge Drive  Address  Orlando, FL 32806  City/State and Zip Code geoffdgoldman@gmail.com  E-mail address: (to be used for future annual report notification)  tion concerning this matter, please call:  407 865-2746  and Code Daytime Telephone Number  for the following amount:  ce \$30.00 Filing Fee & Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)  Areas:  Street Address:  On Section Of Corporations  Street Address:  Registration Section Division of Corporations			
	1801 P	opperidge Drive		
	Name of Limited Liability Company  sed Articles of Amendment and fee(s) are submitted for filing.  num all correspondence concerning this matter to the following:  Geoffrey D. Goldman  Name of Person  College Park Properties, LLC  Firm/Company  1801 Pepperidge Drive  Address  Orlando, FL 32806  City/State and Zip Code geoffdgoldman@gmail.com  F-mail address: (to be used for future annual report notification)  or information concerning this matter, please call:  Goldman  407  Name of Person  Area Code  Daytime Telephone Number  is a check for the following amount:  0 Filing Fee  Certificate of Status  Certificate Copy  Certificate Copy  Certificate Copy  Certificate Copy is enclosed)  Certificate Certified Copy  Certificate Status  Registration Section  Division of Corporations  Street Address:  Registration Section  Division of Corporations			
	Orland	o, FL 3 <b>28</b> 06		
		Adman@amail.com	,	
	gcorrage	-		fication)
For further informa	ition concerning t		·	,
Geoffrey Goldman				
1	lame of Person			e Telephone Number
Enclosed is a check	for the following	g amount:		
■ \$25.00 Filing F			Certified Copy	Certificate of Status &
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P.O. Box	-	13	The Centre of T	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

College Park Properties, LLC	
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on $\frac{6/20/2003}{1.03000022546}$	and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on our records, enter the na agent and/or the new registered office address here:	nme of the new registered
N. C.V. D. J. J.	
Name of New Registered Agent:	- 100
New Registered Office Address:	· 
Enter Florida street address	
	Zip Codé -
City	Zip Codé
New Registered Agent's Signature, if changing Registered Agent:	1 5

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 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.

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	Geoffrey D Goldman	1801 Pepperidge Drive	□∧dd
		Orlando, FL 32806	□Remove
			■ Change
MGRM	Christine F Goldman	1801 Pepperidge Drive	\_\Add
		Orlando, FL 32806	□Remove
			<b>■</b> Change
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ffective date, if other than the an effective date is listed, the date mulote: If the date inserted in this becoment's effective date on the f	st be specific and cannot be prior lock does not meet the applic	able statutory filing requir	(optional) 90 days after filing.) Pursuant to 60 ements, this date will not be lis	5.020 ted a:
record specifies a delayed effectivistiled.	e date, but not an effective ti	me, at 12:01 a.m. on the c	arlier of: (b) The 90th day afte	er the
October 13	2021	·		
<del></del>				
<del></del>	My 11 Sale Signature of a member or author			