

(Request	or's Name)		
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PICK-UP] WAIT MAIL		
(Business Entity Name)			
(Docume	nt Number}		
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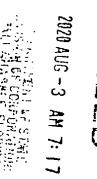
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SEP 2 1 2020 S. YOUNG



COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registration Division of	n Section Corporations		
	Green LLLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles	s of Amendment and fee(s) are sub	unitted for filing.	
Please return all corre	espondence concerning this matter	to the following:	
	Robert J. Chalfin		
		Name of Person	
	College Green L.LLC		
		Firm/Company	
	83 Clarendon Court		
		Address	
	Metrichen, NJ 08840		
	bob@chalfin.com	City/State and Zip Code	
	E-mail address: (to be used for future annual report noti	tication)
For further information	on concerning this matter, please co	all:	
Robert J. Chalfin		732 423-1873	
Nai	ne of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for	or the following amount:		
■ \$25.00 Filing Fed	e S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Ad</u> Registratio	on Section	Street Address: Registration Sec	
Division o P.O. Box (of Corporations 5327	Division of Cor The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

College Green I 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 May 29, 2013 Florida document number $\underline{1.13000077664}$ 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" of the abbreviation "LLC." c/o Robert J Chalfin Enter new principal offices address, if applicable: 83 Clarendon Court (Principal office address MUST BE A STREET ADDRESS) Metuchen, NJ 08840 c/o Robert J. Chalfin Enter new mailing address, if applicable: 83 Clarendon Court (Mailing address MAY BE A POST OFFICE BOX) Metuchen, NJ 08840 B. 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: James Engelmann Name of New Registered Agent: 3926 Round Table Court New Registered Office Address: Enter Florida street address , Florida 34638 Zip Code Land O' Lakes

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 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 Changing Registered Agent, Signature of New Registered Agent

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>	Address	Type of Action
			□Add
			□Remove
			☐Change
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			□Remove
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Page 2 of 3

			
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ffective date, if other than the an effective date is listed, the date mu Sote: If the date inserted in this becoment's effective date on the E	date of filing: st be specific and cannot be prior to date ook does not meet the applicable stoppartment of State's records.	(option of filing or more than 90 days after fil atutory filing requirements, this d	(al) ling.) Pursuant to 605.0207 late will not be listed as
e record specifies a delaye The 90th day after the rec	d effective date, but not an e ord is filed.	effective time, at 12:01 a.r	m. on the earlier o
ated July 29	2020		
TO	Agnature of a member or authorized re	coresentative of a member	
	regional via a recinion in authorized to	specialities of a member	
Robert J. Chalfin	Typed or printed name	Af sinner	

Page 3 of 3