# L19000040587

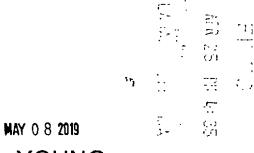
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Name)	
(Do	ocument Number)	
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S. YOUNG

# **COVER LETTER**

TO:	Registration Sec Division of Corp	ction porations		
	Central Parl	: 142, LLC		
SUBJE	CT:	Name of Limit	ed Liability Company	
The end	closed Articles of a	Amendment and fee(s) are subm	nitted for filing.	
Please	return all correspo	ndence concerning this matter to	o the following:	
		Linda K. Shaw		
			Name of Person	
		Central Park 142, LLC		
			Firm/Company	
		386 Pine Tree Rd.		
			Address	
		Lake Mary, FL. 32746		
		scms.ls@mail.com	City/State and Zip Code	
		E-mail address: (t	o be used for future annual rep	ort notification)
For fur	ther information c	oncerning this matter, please ca	н:	
Linda	K. Shaw		407 402-2 at ()	
	Name o	f Person	Area Code	Daytime Telephone Number
Enclos	ed is a check for the	ne following amount:		
□ \$2	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclos	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

### MAILING ADDRESS:

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

## STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Central Park 142, 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 February 11, 2019 and assigned Florida document number \_\_\_\_\_L19000040587 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Central Park 142, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LI.C" or the abbreviation "L.L.C." 386 Pine Tree Rd. Enter new principal offices address, if applicable: Lake Mary, FL 32746 (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 name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: 386 Pine Tree Rd. New Registered Office Address: Enter Fiorida street address \_, Florida 32746

Zip Code Lake Mary

### 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.

City

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>	<u>Address</u>	Type of Action
MGR	Shaw Construction and Management Services, Inc.	386 Pine Tree Rd. Lake Mary, FL. 32746	
			□ Remove
			☐ Change
			Remove
			Change
			Add
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(If an effective date is list Note: If the date inse	der than the date of filing:
the record specifie ) The 90th day a	s a delayed effective date, but not an effective time, at $12\!:\!01$ a.m. on the earlier of the record is filed.
April 9 Dated	2019
	0 6 8
	Signature of a member or authorized representative of a member
	haw, Shaw Construction and Management Services, Inc.

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Filing Fee: \$25.00