

# L21000383546

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

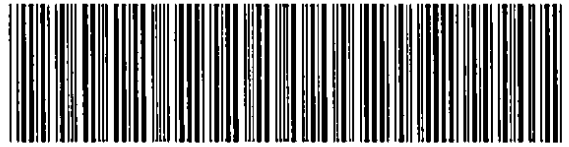
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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FILED  
2021 DEC 22 AM 9:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECORDED  
2021 DEC 22 PM 2:57  
TALLAHASSEE, FLORIDA

Incorporating Services, Ltd.

1540 Glenway Drive  
Tallahassee, FL 32301

850.656.7956

Fax: 850.656.7953

www.incserv.com

e-mail: accounting@incserv.com



**ORDER FORM**

**TO** Florida Department of State  
The Centre of Tallahassee  
2415 North Monroe Street, Suite 810  
Tallahassee, FL 32303  
corphelp@dos.myflorida.com  
850-245-6051

**FROM** Melissa Moreau  
mmoreau@incserv.com  
850.656.7953

**REQUEST DATE** 12/21/2021

**PRIORITY** Regular Approval

**OUR REF.# (Order ID#)** 984724

**ORDER ENTITY**  
CG FL QOF LLC

**PLEASE PERFORM THE FOLLOWING SERVICES:**

**CG FL QOF LLC ( FL )**

File the attached amendment

**NOTES:**

\$25.00 Authorized

Email address for annual report reminders: [cbetterley@morgdevo.com](mailto:cbetterley@morgdevo.com)

**RETURN/FORWARDING INSTRUCTIONS:**

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

A handwritten signature in black ink, appearing to be "Wb" or similar, written over a horizontal line.

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

CG FL QOF 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 August 26, 2021 and assigned Florida document number L21000383546.

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 "LLC."

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 name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

*Enter Florida street address*

\_\_\_\_\_, Florida \_\_\_\_\_  
City 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 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>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
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		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change

SECRET  
 2021 DEC 22 AM 9:10  
 TALLAHASSEE, FL

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

Article III is deleted in its entirety and replaced with the following:

The Company's purposes are to (a) qualify as a "qualified opportunity fund" under 2017 H.R. 1, known as the Tax Cuts and Jobs Act (the "TCJA"), and to directly or indirectly through the Company and/or one or more subsidiaries, identify, source, acquire, originate, maintain, own, manage, finance, refinance, sell, hold, reposition, pledge, hedge, exchange, and otherwise deal in and with commercial real estate properties, joint venture equity investments, and other real estate-related assets that are compelling from a risk-return perspective, located in "qualified opportunity zones," as designated by the TCJA, including any asset that is deemed to be "qualified opportunity zone property" that is not real property; (b) promote, conduct, or engage in, directly or indirectly, any business, purpose, or activity that lawfully may be conducted by a limited liability company formed pursuant to the Florida Revised Limited Liability Company Act; (c) acquire, hold, and dispose of interests in any corporation, partnership, joint venture, limited liability company, trust, or other entity and, in connection therewith, to exercise all of the rights and powers conferred upon the Company with respect to its interests therein; and (d) conduct any and all activities related or incidental to the foregoing purposes.

**E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated December 21, 2021



Signature of a member or authorized representative of a member

Cameron Betterley, Esq., Authorized Representative

Typed or printed name of signee

**Filing Fee: \$25.00**