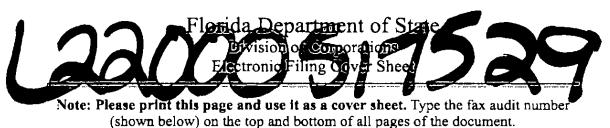
Division of Corporations



(((H23000030990 3)))



H230000309903ABC-

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : I20160000017 Phone : (855)498-5500 : (800)432-3622 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

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CENTRAL OAKS TOWNHOMES, LLC

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JAN 25 2023

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\$		COVER LETTER	
ΓΟ: Registration Division of C		, ,	•
	AL OAKS TOWNHOMES, LLC	;	•
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	William T. Conroy		
		Name of Person	
	Backstreets Capital, LLC		
		Firm/Company	··· V-1
	248 Mirror Lake Drive N.		
		Address	
	St. Petersburg, Fl. 33701		
		City/State and Zip Code	.
	will.conroy@backstreetsca	pital.com (to be used for future annual report no	
or further information	concerning this matter, please c	-	u)(Lacent)
Adrienne DeBonis	Competiting that matter, produce of		
	of Person	at ()	me Telephone Number
Name	or reison	Area Code Phyti	me Telephone Number
Inclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 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)
Mailing Addr Registration Division of P.O. Box 61 Tallahassee	n Section Corporations 327	Street Address: Registration S Division of Co The Centre of 2415 N. Monr	orporations
		Tallahassee F	1 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CENTRAL OAKS TOWNHOMES, L	JLC					
(Name of the Limited (A	Liability Compan Florida Limited Li	y as it now appears or ability Company)	our records.		-	
The Articles of Organization for this Limited Liab Florida document number L22000517529	oility Company v	were filed on 12/9/2	2	and :	assigno	ed
This amendment is submitted to amend the follow	ring:					
A. If amending name, enter the new name of th	he limited liabil	ity company here:				
The new name must be distinguishable and contain the work	ds "Limited Liabili	y Company," the desig	nation "LLC" or the ab	breviation	"L.L.C.	
Enter new principal offices address, if applicab	ile:					
(Principal office address MUST BE A STREET)	ADDRESS)					
					 	
Enter new mailing address, if applicable:						
(Mailing address MAY BE A POST OFFICE BO	<u>9X)</u>					
B. If amending the registered agent and/or registered affice address I Name of New Registered Agent:		ldress on our reco	rds, <u>enter the nam</u>	e of the r	TEW TE	gistere
New Registered Office Address:					L_	7
		Enter Florida	street address	•	7 7	<u> </u>
			, Florida	<u> </u>	<u>ښ</u>	
		City		Zip Coo	ieCT	
New Registered Agent's Signature, if changing Reg	gistered Agent:					
I hereby accept the appointment as registered of provisions of all statutes relative to the proper accept the obligations of my position as registe being filed to merely reflect a change in the regionary has been notified in writing of this change in the change in the region pany has been notified in writing of this change in the region pany has been notified in writing of this change in writing of the change in which we will be compared in writing of the change in the cha	and complete pered agent as pr gistered office o	performance of my povided for in Cha	duties, and I am j oter 605, F.S. Or,	familiar v if this do	with an ocumen	nd
	If Chang	ing Registered Agent,	Signature of New Re	gistered Ag		_

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

Title	<u>Name</u>	Address		Type of Action
MGR	J SQUARE DEVELOPERS, LLC		248 Mirror Lake Drive N. St. Petersburg, FL 33701	
				≡ Remove
				□ Change
MGR	J SQUARE REALTY AND DEVELOPMENT	CORP	248 Mirror Lake Drive N. St. Petersburg, FL 33701	≣ Add
				□Remove
				Change
				□Add
				☐ Change
				🗆 Add
			, ,	(□Remove
				Change
 				□Add
				□Remove
				☐ Change
		······	· · · · · · · · · · · · · · · · · · ·	□Add
				□Remove
				[]Change

. If amending any other informati	tion, enter change(s) here: (Attach additional sheets, if necessary.)
 	
	
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Effective date, if other than the offfertive date is listed, the date must Note: If the date inserted in this bloodocument's effective date on the Department.	date of filing:
he record specifies a delayed effective ord is filed.	e date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
January 24 Dated	2023
<u>y</u> v	
	Signature of a member or authorized representative of a member
William T. Conroy	
	Typed or printed name of signee

Filing Fee: \$25.00