

LA220000522475

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

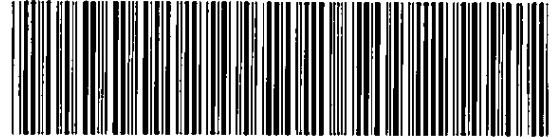
(Business Entity Name)

(Document Number)

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## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** The Omega Center for Youth and Community Development  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christopher Holt

Name of Person

Firm/Company

2783 Bolzano Dr

Address

Apopka/Florida 32712

City/State and Zip Code

cholt7@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christopher Holt

Name of Person

at ( 407 ) 810-0103

Area Code

Daytime Telephone Number

Enclosed 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 Address:**

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

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 8, 2024

CHRISTOPHER HOLT  
2783 BOLZANO DR  
APOPKA, FL 32712

SUBJECT: THE OMEGA CENTER FOR YOUTH AND COMMUNITY  
DEVELOPMENT LLC  
Ref. Number: L22000522475

We have received your document for THE OMEGA CENTER FOR YOUTH AND COMMUNITY DEVELOPMENT LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered agent must be at a Florida street address.

A post office box is not an acceptable address for the registered agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Rebekah White  
Regulatory Specialist III

Letter Number: 524A00010137

*Rec 5-23*

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

THE OMEGA CENTER FOR YOUTH AND COMMUNITY DEVELOPMENT

(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 12/13/2022 and assigned  
Florida document number 1.22000522475.

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)

8524 Compass Point Ave

Orlando, FL 32832

**Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

8524 Compass Point Ave

Orlando, FL 32832

**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:

Tony Greene

New Registered Office Address:

~~PO Box 682666~~

7505 Bordwine Dr.

*Enter Florida street address*

Orlando

Florida 32868

32818

*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**

<b><u>Title</u></b>	<b><u>Name</u></b>	<b><u>Address</u></b>	<b><u>Type of Action</u></b>
AMBR	Carl Gilmore	8524 Compass Point Ave	<input checked="" type="checkbox"/> Add
		Orlando, FL 32832	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Bruce Mount	815 N MAGNOLIA AVE	<input type="checkbox"/> Add
		Suite 300	<input checked="" type="checkbox"/> Remove
		Orlando, FL 32803	<input type="checkbox"/> Change
AMBR	Gregory Richardson	1559 Orange Valley Ridge	<input checked="" type="checkbox"/> Add
		Ocoee, FL 34761	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Tony Greene	PO Box 682666	<input type="checkbox"/> Add
		Orlando, FL 32868	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	Russell Drake	4434 BRADLEY AVE	<input type="checkbox"/> Add
		ORLANDO FL 32839	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	William Riley	412 CASTING COURT	<input type="checkbox"/> Add
		ORLANDO FL 32825	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

Remove: AMBR Shelson Watson, 4704 ALHAMA STREET, Orlando, FL 32811

Remove: AMBR Carjonne Cooper, 777 N ORANGE AVE APT 538, Orlando, FL 32801

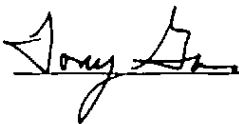
**E. Effective date, if other than the date of filing:** \_\_\_\_\_ **(optional)**

*(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 April 15, 2024



Signature of a member or authorized representative of a member

Tony Greene

Typed or printed name of signee