

L05000/20268

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

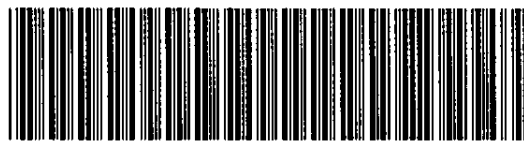
(Business Entity Name)

(Document Number)

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10/29/12--01005--003 **25.00

FILED
12 OCT 29 PM 3:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
OCT 30 2012

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PARAGON DEVELOPMENT MANAGERS, LLC

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:

MICHELLE DY

Name of Person

CONVERGENT MANAGEMENT LLC

Firm/Company

4600 WEST CYPRESS STREET SUITE 120

Address

TAMPA FL 33607

City/State and Zip Code

MICHELLE@CONVERGENTCAP.COM

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

For further information concerning this matter, please call:

MICHELLE DY

Name of Person

at (813)

386-4908

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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/COURIER ADDRESS:

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

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

PARAGON DEVELOPMENT MANAGERS, LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
12 OCT 29 PM 3: 55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 12/16/2005 and assigned
Florida document number L05000120268.

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 end with 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)

4600 WEST CYPRESS STREET

SUITE 120

TAMPA FL 33607 US

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

4600 WEST CYPRESS STREET

SUITE 120

TAMPA FL 33607 US

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:

4600 WEST CYPRESS STREET SUITE 120

Enter Florida street address

TAMPA

City

, Florida

33607

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 608, 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.

[Signature]
If Changing Registered Agent, **Signature of New Registered Agent**

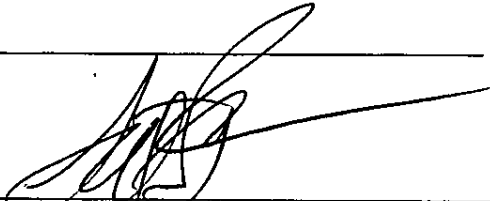
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	PARAGON CAPITAL PARTNERS LLC	3105 WEST WATERS AVENUE, SUITE 107 TAMPA FL 33614 US	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	PARAGON CAPITAL PARTNERS LLC	4600 WEST CYPRESS STREET SUITE 120 TAMPA FL 33607 US	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated 10/25/2012, _____



 Signature of a member or authorized representative of a member
Santosh Govindaraj

 Typed or printed name of signee