## L06000025787

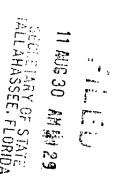
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D. BRUCE

AUG 31 2011

**EXAMINER** 

## **COVER LETTER**

. = •	Division of Co				
SUBJE	CT·	Analytix	Data Services LLC		
301312			imited Liability Company	· · · · · · · · · · · · · · · · · · ·	
The end	closed Articles of	Amendment and fee(s) are	submitted for filing.		
Please r	return all correspo	ondence concerning this ma	tter to the following:		
		·	Prasad Kalyanapu		
			Name of Person		
		An	alytix Data Services L.L	.C.,	
			Firm/Company		<b>1</b>
		1417	5, SullyField Circle, Sui	te 400	
			Address		AUG 30 CNETARY
			Chantilly, VA 20151		A SERVICE OF THE SERV
		100	City/State and Zip Code		F STATE
		E-mail addres	orasadk@analytixds.cor s: (to be used for future annual rep	nort notification)	RIDA
For furt	her information of	concerning this matter, pleas	se call:		
		ad Kalyanapu	at (_603_)	2165141	
	Name o	of Person	Area Code &	Daytime Telephone Number	
Enclose	d is a check for t	he following amount:			
<b>\$25.</b>	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is e	nclosed) Certified	te of Status &
	Registr Divisio	ING ADDRESS: ration Section on of Corporations ox 6327	Registration	Corporations	

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Analytix Data S	ervices L.L.C.,	<del> </del>		
( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records. Liability Company)	.)		
The Articles of Organization for this Limited Liability Company Florida document numberL06000025787	were filed onMarch 10, 20	and assigned		
riorida document number				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
The new name must be distinguishable and end with the words "Limit" L.L.C."	ited Liability Company," the designation	on "LLC" or the abbreviation		
Enter new principal offices address, if applicable:	14175, SullyField Circle			
(Principal office address MUST BE A STREET ADDRESS)	Suite # 400	S 3		
	Chantilly, VA 20151			
		To an in		
Enter new mailing address, if applicable:	14175, SullyField Circle	SE N		
(Mailing address MAY BE A POST OFFICE BOX)	Suite 400	Dr: <b>9</b>		
	Chantilly, VA 20151			
D. If any other the material court of the contract of the				
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		ter the name of the new		
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 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.

MGR = Ma MGRM = 1	anager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
Mr	Madan Kondayyagari	4780 Walbern Ct Chantilly, VA 20151	✓ Add Remove
<u>Mrs</u>	Prathima Errabelli	4780 Walbern Ct Chantilly, Va 20151	
		· · · · · · · · · · · · · · · · · · ·	
			= -
			Add Remove
	<del></del>		Add Remove
		er change(s) here: (Attach additional sheets, if necessed to the company with effect from Decemb	
	010		
_			11 AUG 30
Dated	August 10 ,	2011 .	E E
	Lan-	/1 —	STATE LORID.

Page 2 of 2

Filing Fee: \$25.00