

LO7000012969

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SECRETARY OF FLORIDA
ALACHUA COUNTY
17 MAR 27 PM 1:04

MAR 28 2017

S. YOUNG

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Federal Express

March 16, 2017

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

Re: CDSS Forest Oaks, LLC
Document No. L07000012969

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SECRETARY OF FLORIDA
TALLAHASSEE, FLORIDA
17 MAR 27 PM 1:04

Dear Sir or Madam:

We are enclosing for filing with your office Articles of Amendment and a Statement of Authority.

Please file the enclosures in the following order: (i) Articles of Amendment *then* (ii) Statement of Authority.

Please *certify* the Statement of Authority and return the certified copy to the undersigned at the address shown above.

We are enclosing our check in the amount of \$80.00 for (a) the filing of the Articles of Amendment, (b) the filing of the Statement of Authority, and (c) the certified copy of the Statement of Authority.

Cordially,


Merritt A. Gardner

MAG:lap
Enclosures

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

CDSS Forest Oaks, 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 February 5, 2007 and assigned
Florida document number L07000012969.

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

City

Florida

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>
MGR	Chris P. Tsokos	1202 Parrilla de Avila	<input type="checkbox"/> Add
		Tampa, Florida 33613	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Dennis Koutras	1528 Albemarle Court	<input type="checkbox"/> Add
		Dunedin, Florida 34698	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Suresh Khator	1505 South Boulevard	<input type="checkbox"/> Add
		Houston, Texas 77006	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGRM	Steffen Aziz	3817 Lake Joyce Drive	<input type="checkbox"/> Add
		Land O' Lakes, Florida 34639	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

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TALLAHASSEE, FLORIDA
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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.

(b) The 90th day after the record is filed.

Dated March 14, 2017

March 14, 2017


Signature of a member or authorized representative of a member

DENNIS KOUTRAS.
Typed or printed name of signer