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COVER LETTER

TO:

Registration Section

Division of C	orporations			
SUBJECT:	CCP T	AMARAC LLC		
SUBJECT:		ited Liability Company		
			v.	÷
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.		•
Please return all corresp	oondence concerning this matte	r to the following:		
				ور ج
		MICHELLE DY		
		Name of Person		17.0CT 29
				2 % T
CONVE		RGENT MANAGEMEN	NT LLC	
	•	Firm/Company		176 4 V
	4600 WEST	CYPRESS STREET	SUITE 120	
		Address		- The
•		₩ .₹	-	- ,
		TAMPA FL 33607		
		City/State and Zip Code		
	MICHELL	E@CONVERGENTCA (to be used for future annual repo	AP.COM	,
		·	or nouncation)	
For further information	concerning this matter, please	call:		
. M	ICHELLE DY	at (813)	386-4908	
Name of Person		Area Code &	Daytime Telephone Numbe	r
Enclosed is a check for	the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is en	closed) Certified	ite of Status &
	LING ADDRESS:		OURIER ADDRESS:	
Registration Section Division of Corporations		Registration	Section Corporations	
P.O. Box 6327		Clifton Build	ding	•
Tallah	assee, FL 32314	2661 Execut Tallahassee,	ive Center Circle FL 32301	•

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CCD TAMADAC II C

(Name of the Limited Liability Compa (A Florida Limited	any as it now appea Liability Company)	ers on our records.)	
The Articles of Organization for this Limited Liability Company Florida document numberL11000070006	y were filed on	06/15/2011	and assigned
This amendment is submitted to amend the following:		28 T	
A. If amending name, enter the new name of the limited lial			2 11
The new name must be distinguishable and end with the words "Lim"L.L.C."	nited Liability Comp	any," the designation	n "LLC" or the abbreviation
Enter new principal offices address, if applicable:	4600 WEST	CYPRESS STR	REET
(Principal office address MUST BE A STREET ADDRESS)	SUITE 120		
•	TAMPA FL 3	33607 US	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4600 WEST SUITE 120	CYPRESS STR	
	TAMPA FL 33607 US		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her Name of New Registered Agent: New Registered Office Address: 4600 WEST	ffice address on re:		220 address
	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 company has been notified in writing of this change.

If Changing Registered Agent Senature 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 Title · <u>Name</u> **Address** Type of Action MGR CONVERGENT MANAGEMENT LLC 3105 WEST WATERS AVENUE, ☐ Add ✓ Remove SUITE 107 **TAMPA FL 33614 US** CONVERGENT MANAGEMENT LLC MGR 4600 WEST CYPRESS STREET ✓ Add **SUITE 120** Remove TAMPA FL 33607 US Add Remove Add-Remove ∏Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary) 10/25/2012 Dated_ Signature of a member or authorized representative of a member Santosh Govindaraju.
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00