## 2/2000049/32

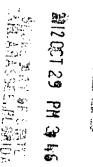
•	
(Requestor's Name)	
(Address)	_
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	<del></del>
, ,	
(Document Number)	
(	
Certified Copies Certificates of Status	
	_
	_
Special Instructions to Filing Officer:	
A. LUNT	*
OCT <b>31</b> 2012	
EXAMINE	中
EVAIAII	_ [

Office Use Only



000240794440

10/29/12--01005--007 \*\*25.00



## **COVER LETTER**

**Registration Section** 

Division of C	orporations				
SUBJECT:	WEST GAN	DY HOLDINGS LLC			
SUBSECT.	<del></del>	nited Liability Company		•	
	•				
The enclosed Articles	of Amendment and fee(s) are su	abmitted for filing.		,	
Please return all corres	pondence concerning this matte	er to the following:			
		Š			
		MICHELLE DY			
		Name of Person			
	CONVE	RGENT MANAGEMEN	T LLC		
		Firm/Company			
	4600 WES1	4600 WEST CYPRESS STREET SUITE 120			
		Address			
		TAMPA FL 33607		MIZOCT 29 PH	
		City/State and Zip Code		( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )	
	MICHELL	E@CONVERGENTCAF	P.COM	5	
	E-mail address:	(to be used for future annual report	notification)		
For further information	concerning this matter, please	call:			
. •	IICHELLE DY	at ( 813 )	386-4908	•	
Name of Person			aytime 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 encl	osed) Certified	te of Status &	
Regis Divis P.O. l	LING ADDRESS: tration Section ion of Corporations Box 6327 nassee, FL 32314	Registration So Division of Co Clifton Buildin	orporations ng e Center Circle		

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

	ST GANDY H					
· (Name of the Limite	d Liability Company A Florida Limited Lia	as it now appear bility Company)	rs on our records.	<del></del> .		
The Articles of Organization for this Limited	04/11/2012	and assigned				
Florida document numberL12000049132						
				M12 801		
This amendment is submitted to amend the following	llowing:	,		2 2 7		
ر میران در این از ا این این از ا						
A. If amending name, enter the new name	of the limited liabili	ty company her	<u>'e</u> :	10 cm TO 1		
The new name must be distinguishable and end w "L.L.C."	rith the words "Limite	d Liability Compa	iny," the designation "L	LC" of the abbreviation		
Enter new principal offices address, if appli	4600 WEST CYPRESS STREET					
(Principal office address MUST BE A STRE	ET ADDRESS)	SUITE 120				
		TAMPA FL 33607 US				
•		`				
Enter new mailing address, if applicable:	4600 WEST CYPRESS STREET					
(Mailing address MAY BE A POST OFFICE	E BOX)	SUITE 120	,			
TAMPA FL 33607 US						
B. If amending the registered agent and	or registered office	e address on o	our records, <u>enter t</u>	he name of the new		
registered agent and/or the new registered of	office address here:			•		
	•					
Name of New Registered Agent:						
New Registered Office Address:	New Registered Office Address: 4600 WEST CYPRESS STREET SUITE 120					
•		Enter Florida street address				
		'AMPA	, Florida	33607		
		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 the Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, eby 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 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 Type of Action Name** Address CONVERGENT MANAGEMENT LLC 3105 WEST WATERS AVENUE. **MGR** SUITE 107 TAMPA FL 33614 US CONVERGENT MANAGEMENT LLC MGR 4600 WEST CYPRESS STREET SUITE 120 TAMPA FL 33607 US ☐ Add Remove  $\neg$  Add Remove  $\square$ Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 10/25/2012 Signature of a member or authorized representative of a member Santosh Govindargiu

Page 2 of 2

Filing Fee: \$25.00

Typed or printed name of signee