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O SIMMONS MAY 0 5 2017

COVER LETTER

FO: Registration Section Division of Corporations	
SUBJECT: CCP Holdings LLC	
Name of Limited Liability Company	of Amendment and fee(s) are submitted for filing. spondence concerning this matter to the following: Amum Amar Name of Person CCP Holdings, UC Firm/Company 9158 NW 418+ Manor Address Coral Springs, FL 330105 City/State and Zip Code E-mail address: (to be used for future annual report notification) at (017), 513-1085
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Anum Athar	
CCP Holdings, LLC	
Firm/Company	
9158 NW 41st Manor	
Address	
Coral Springs, Fiz 330105	
City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
or further information concerning this matter, please call:	
Katil Clancy at (617) 513-1085	
Name of Person Area Code Daytime Telephone Number	
inclosed is a check for the following amount:	
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & \$\Bigcup \$55.00 Filing Fee & \$\Bigcup \$60.00 Filing Fee, \$\Bigcup \$	

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**

A 7 7	
CCP Holding	***
	pany as it now appears on our records.) d Liability Company)
The Articles of Organization for this Limited Liability Compa	ny were filed on 01·17·2017 and assigned
Florida document number L1 7 0000 12179.	٧٠.
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lis	ability company here:
The new name must be distinguishable and contain the words "Limited Lia	
Enter new principal offices address, if applicable:	3921 NW 126th Ave
(Principal office address MUST BE A STREET ADDRESS)	coral Springs, Fr 33005
	-021 LIM 17/0th Ang
Enter new mailing address, if applicable:	2921 NW 176th Ave. Coral Springs Fi 33065
Mailing address MAY BE A POST OFFICE BOX)	corai springs, Fi 33065
	· .
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 h	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida City Zip Code
Now Designated Agentle Signature if the saint Designature 1 4	·
New Registered Agent's Signature, if changing Registered Agen	<u>ıı:</u>

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> **Address Type of Action** NW 41St Manor 9158 Athar Anum Coral □ Change Katie Clancy ☐ Change _□ Add; ☐ Remove ☐ Change □ Add □ Remove ☐ Change □ Add □ Remove ☐ Change □ Add □ Remove ☐ Change

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ffective date, if other an effective date is listed	er than the date of filing I, the date must be specific and	g:d cannot be prior to date	of filing or more than 90	(optional) 0 days after filing.) Pur	suant to 605.0207
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00