L04000016645

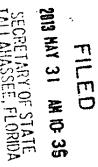
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COVER LETTER

TO: Registration Section
Division of Corporations

Jose L Cala LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jose L Cala

Name of Person

Jose L Cala LLC

Firm/Company

201 East 20th Street

Address

Hialeah FI 33010

City/State and Zip Code

Selmacala@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jose L Cala

,⁷⁸⁶ ,262-7901

Name of Person

Area Code & Daytime 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 enclosed)

□\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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



Division of Corporations

May 13, 2013

JOSE L CALA 201 EAST 20TH STREET HIALEAH, FL 33010

SUBJECT: JOSE L CALA LLC Ref. Number: L04000016645

We have received your document for JOSE L CALA LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Chapter 608, Florida Statutes, does not allow limited liability companies to issue shares or stock. Consequently, limited liability company documents cannot contain any references/terms which may implicate otherwise. Please delete any references to terms such as "shares," "stock," "stockholders," "shareholders" or the like from your document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan Regulatory Specialist II

Letter Number: 713A00011771

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED
2013 HAY 31 AH 10: 35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Jose L Cala 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 03/02/2004 and assigned Florida document number <u>L04</u>000016645 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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 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 . Florida_

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.

City

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
Mgr	Mike Cala	201 East 20th St	Add
		Hialeah,Fl 33010	Remove
			Remove
			Add
			Remove
******			Add
			Add
			Remove
	***************************************		Add
			Remove

D.	If amending an	y other information, ente	er change(s) here:	(Attach additional sheets, if necess	ary.)
•	************************************	**************************************			
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Dat	ed May 21		2013		
		TR	sela	zed representative of a member	
				zed representative of a member	
		Hose L	Cala-	•	
		•	Typed or printed	name of signee	-

Page 3 of 3

Filing Fee: \$25.00

2013 MAY 31 AN ID 31
SECRETARY OF STATE