L08000/13827

•		
(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
A. LUNT		
JUN 2 8 2011		
EXAMINER		

Office Use Only



700236599187

06/25/12--01015--021 **25.00

JALLAHASSEE, FIGNE

COVER LETTER

Division of Corporations	
SUBJECT: Catamount Asset Group, 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:	
Paul B. Woods, Esq.	
LAW Offices of PAUL B. W. (Firm/Company) 1221 Brickell Ave., Suite (Address)	nodo, P.A. July 25
1221 Brickell Ave., Suite	900 P. A. SSEE TO
Mian, FL 33/3/ (City/State and Zip Code)	8 2
For further information concerning this matter, please call:	
PAul 8. Woods, Eg. at 305.5 (Name of Person) (Area Code & Daytin	59-9060 ne Telephone Number)
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\text{Certificate of Status}\$\$ \$\text{Certificate of Status}\$\$ \$Certificate of Status\$\$ \$Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section

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

Catamount Asset Group, 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 Com-	· · · · · · · · · · · · · · · · · · ·
Florida document number <u>L08000113827</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	I liability company here:
Catamont Asset Group, LLC (N/A)	্ৰী প্ৰ
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	1221 Brickell Ave
(Principal office address MUST BE A STREET ADDRES	15) Suite 900 Miami, FL 33131 C10 Paul B. Woods, Esg.
Enter new mailing address, if applicable:	1221 Brickell Ave
(Mailing address MAY BE A POST OFFICE BOX)	Suite 900
	Suite 900 Minni, FL 33/3/
B. If amending the registered agent and/or registered registered agent and/or the new registered office address	ed office address on our records, <u>enter the name of the new</u> s <u>here</u> :
Name of New Registered Agent:	Brickell Ave Suite 900
New Registered Office Address: / ZZ/	(Enter Florida street address)
n.1	
	jami , Florida 33/3/
	(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 confirm that the limited liability company has been notified in writing of this change.

(If Changing Registered Agent, Signature of New Registered Agent)

or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member **Address** Type of Action **Title** Name ☐ Add Remove Remove Add Remove Add T Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager

Page 2 of 2

Filing Fee: \$25.00