

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CATMA 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:

Joy P. Ewertz, Esq.

Name of Person

The Law Offices of Joy P Ewertz

Firm/Company

PO Box 547381

Address

Orlando, FL 32854

City/State and Zip Code

Joy@joyewertzlaw.com

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

For further information concerning this matter, please call:

Joy Ewertz

Name of Person

407 956-4122

at ()

Area Code & Daytime Telephone Number

2013 JUN 27 AM 11:17
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

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

CATMA 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 09/10/2009 and assigned Florida document number L09000088181.

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)

FILED
2013 JUN 27 AM 11:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

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

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:

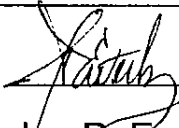
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Juan Bardina	30 Arapahoe Ct	<input type="checkbox"/> Add
		Portola Valley, CA 94028	<input checked="" type="checkbox"/> Remove
MGRM	Pedro A Godoy	30 Arapahoe Ct	<input type="checkbox"/> Add
		Portola Valley, CA 94028	<input checked="" type="checkbox"/> Remove
MGR	Juan Bardina	30 Arapahoe Ct	<input checked="" type="checkbox"/> Add
		Portola Valley, CA 94028	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

SECURITY OF STATE
 TALLAHASSEE, FLORIDA
 JUN 27 AM 11:17
 FILED

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated June 24, 2013



Signature of a member or authorized representative of a member

Joy R. Ewertz, Esq.

Typed or printed name of signer

Page 3 of 3

Filing Fee: \$25.00

2013 JUN 27 AM 11:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED