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PICK-UP WAIT MAIL
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TALLAHASSEE. FLORIDA

C. LEWIS

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EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 12, 2011

MARTHA A. VERGE CATALUNYA INVESTMENTS LLC 1835 E. HALLANDALE BEACH BLVD #592 HALLANDALE BEACH, FL 33009

SUBJECT: CATALUNYA INVESTMENTS

Ref. Number: GP1100001332

We have received your document for CATALUNYA INVESTMENTS and your check(s) totaling \$50.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You can not have the LLC suffix on a general partnership. Also, you must have at least two partners in order to file a general partnership. Both partners must sign on the partnership registration statement.

If you have any further questions concerning your document, please call (850) 245-6047.

Letter Number: 211A00023438

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

COVER LETTER

Division of Corporations				
SUBJECT: CATALUNYA	INVESTMENTS LLC			
Name of Lin	nited Liability Company			
The enclosed Articles of Amendment and fee(s) are st	ibmitted for filing.			
Please return all correspondence concerning this matter	er to the following:			
JACO	UELINE R. PIMAS			
	Name of Person			
CATAL	UNYA INVESTMENTS LLC Firm/Company			
4-4	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
1835 E Hallandale Bul Blud # 592				
//	Address			
HALLAN	10ALE, FC 33009			
City/State and Zip Code				
1835 E Hallandale Beh Blud # 592 Address HALLANDALE FC 33009 City/State and Zip Code Vergemng a 9 MAIL. Com E-mail address: (to be used for future against report notification)				
For further information concerning this matter, please	call:			
Jagueline l'inn	at (954) 309 7/33 Area Code & Daytime Telephone Number			
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 & \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) \$\text{Solutional Copy is enclosed}\$ \$\text{Certified Copy}\$ (additional copy is enclosed)			

MAILING ADDRESS:

TO:

Registration Section

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

FILED

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2011 OCT 19 AM 18: 03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CATALUNY	A INVES	TU ENTS	LLC
(Name of the Limited Liabil) (A Florid	ity Company as it now appea a Limited Liability Company)	rs on our records.)	<u> </u>
The Articles of Organization for this Limited Liability Florida document number <u>L10000934</u>	Company were filed on	9-2-2010	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the li	mited liability company her	<u>·e</u> :	
The new name must be distinguishable and end with the w"L.L.C."	ords "Limited Liability Compa	my," the designation "LL	C" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADI	DRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad	istered office address on o l <u>dress here</u> :	our records, <u>enter the</u>	e name of the new
Name of New Registered Agent:			· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:			
	Enter Florida street address		
	/7:	, Florida	Tim Code
	Citv		ир сове

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 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** <u>Address</u> **Type of Action** Name MGR JACQUELINER. 1835 & Hallandale Sch Add

B/rd. Cuite 592 Remove

Hallandale Fl 33009 Remove \square Add Remove 🔲 Remove \square Add Remove $\prod Add$ ☐Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated October 17 2011. MARTHA A. VERGE MNG
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00