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(Address)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2012 APR 17 AM 8:41

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J. SAULSBERRY
EXAMINER

APR 18 2012

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT:

Jermat, 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:

Pamela Clark

Name of Person

Capital Management Consultants LLC

Firm/Company

743 Gantt Ave

Address

Sarasota, FL 34232

City/State and Zip Code

Pamela @ Corpmark.us

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

For further information concerning this matter, please call:

Pamela Clark

Name of Person

at (941) 320-1837

Area Code & Daytime Telephone Number

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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

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

Page 1 of 2

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

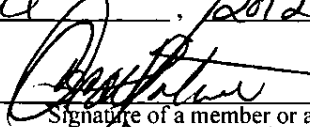
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Pamela Clark	743 Gantt Ave Sarasota FL 34232	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
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			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

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TALLAHASSEE, FLORIDA

Dated 9, April, 2012


Signature of a member or authorized representative of a member
Oscar Platone
Typed or printed name of signee