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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: CAT 5 STRUCTURES 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:
RENKE BIACKWOOD
CAT 5 STRUCTURES LLC Firm/Company
7904 FRONT BEACH Rd.
Swite #102 Panana City Deach E1.32
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:  Rene Blackwood at 979 - 820-0418  Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\square\$\$30.00 Filing Fee & \$\square\$\$\$55.00 Filing Fee & \$\square\$

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(additional copy is enclosed)

MAILING ADDRESS:

Certificate of Status

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

## STREET/COURIER ADDRESS:

Certificate of Status &

(additional copy is enclosed)

Certified Copy

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Limited Liability Co.	TURES L	our records)	<del></del>	
(Name of the Limited Liability Co) (A Florida Limi	ted Liability Company)	our records.		
The Articles of Organization for this Limited Liability Comp	pany were filed on	-14-2012	nd assigned	
Florida document number <u>L12000156</u>				
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 "L.L.C."	Limited Liability Company,"	the designation "LLC" o	r the abbreviation	
Enter new principal offices address, if applicable:		<u> </u>	2613	
(Principal office address MUST BE A STREET ADDRESS	<u>sy</u>	25 J.C.	# ** · · ·	
	, <u>,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	is.	<u> </u>	
		7 <del>1</del>	3	
Enter new mailing address, if applicable:			<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		records, enter the na	me of the ne	
registered agent and of the new registered office address	nere.			
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
		, Florida		
	Citv	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 **Address Title Type of Action** Name 1 MMGR" DESI ARELLANO BLOOM COURTNey DR.

Parana City Beach, Fl.

32408 **L** Remove Remove Remove Remove Remove

D. If ame	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
-	
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_	
Dated	5/28 . 2013.
	Rever Blackwood
	Signature of a member or authorized representative of a member  RFN(F1= 314 KINOC)
	Typed or printed name of signee

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Filing Fee: \$25.00