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COVER LETTER

Divi	sion of Corp	porations								
	CALMA, L	LC								
		Name of Lim	Name of Limited Liability Company							
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing	·						
			•							
Please return	all correspor	ndence concerning this matter	to the following:							
		Prince A Donnahoe IV, Es	q.							
			Name of Person	· · · ·						
		Prince A Donnahoe IV, P.	A .	. ,						
			Firm/Company	 						
		9710 Stirling Road, Suite	104							
			Address	· · ·						
		Cooper City, FL 33024								
		- · · · · · · · · · · · · · · · · · · ·	City/State and Zip Code							
		yservidio@gmail.com								
			to be used for future annual report notific	eation)						
For further in	formation co	oncerning this matter, please ca	ali:							
Yesica Servi	dio	,	305 570-7945							
	Name of	Person		Telephone Number						
Enclosed is a	check for th	e following amount:								
\$25.00 Fi	iling 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:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CALMA, LLC					
(Name of the Limited Liability C (A Florida Lin	ompany as it now appears on ited Liability Company)	n our records.)			
The Articles of Organization for this Limited Liability Complete Horida document number L13000103488			8	and assi	gned
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 contain the words "Limited	Liability Company," the design	gnation "LLC" or th	e abbrevia	tion "L.L	C."
Enter new principal offices address, if applicable:		•			
(Principal office address MUST BE A STREET ADDRES	<u> </u>				
			70		
Enter new mailing address, if applicable:			<u> Da</u>	17	
(Mailing address MAY BE A POST OFFICE BOX)			70	Λρ	: · ·
		·	<u> </u>	N	r.e
			1	772	f +12;
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		ur records, <u>en</u>	ter the	name (of the n
Name of New Registered Agent:			sid.		
New Registered Office Address:					
	Enter Florida	street address	····		
		, Florida	. <u></u>		
	City	<u> </u>		o 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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Yesica Servido	768 MARIANO MORENO	
		VICENTE LOPEZ	□ Remove
	•	BUENOS AIRES 1636	
AMBR	Pablo A. Ciufardi	768 MARIANO MORENO	= Add
		VICENTE LOPEZ	□ Remove
		BUENOS AIRES 1636	Change
AMBR	Francesco Servido	708 LIBERTAD	□ Add
		HAEDO 1706 AR	■ Remove
			Change
AMBR	Estela Bruna Portolan	LIBERTAD	Add
		HAEDO 1706 AR	■ Remove
			17 AP □ Change
40. **- **			Add
			Remove
			□ Change
	white we have		Add
			Remove
	4-19-17		Change

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Filing Fee: \$25.00