

L13000103488

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100297133501

04/26/17--01025--003 **25.00

17 APR 26 PM 2:56
MICHIGAN STATE, LONDON

APR 27 2017

Y SULKER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CALMA, 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:

Prince A Donnahoe IV, Esq.

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

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

For further information concerning this matter, please call:

Yesica Servidio

at (305) 570-7945

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 & 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

CALMA, LLC

Page 1 of 3

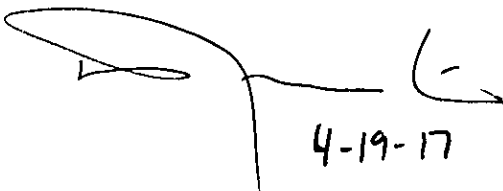
If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Yesica Servido	768 MARIANO MORENO	<input checked="" type="checkbox"/> Add
		VICENTE LOPEZ	<input type="checkbox"/> Remove
		BUENOS AIRES 1636	<input type="checkbox"/> Change
AMBR	Pablo A. Ciufardi	768 MARIANO MORENO	<input checked="" type="checkbox"/> Add
		VICENTE LOPEZ	<input type="checkbox"/> Remove
		BUENOS AIRES 1636	<input type="checkbox"/> Change
AMBR	Francesco Servido	708 LIBERTAD	<input type="checkbox"/> Add
		HAEDO 1706 AR	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Estela Bruna Portolan	LIBERTAD	<input type="checkbox"/> Add
		HAEDO 1706 AR	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

17 APR 26 19 46 43
 TAMPA, FLORIDA
 TAMPA, FLORIDA


 4-19-17

17 APR 26 PM 8 34
FBI
TAMPA, FLORIDA

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(b) The 90th day after the record is filed.

Typed or printed name of signee