L09000025851

(Requestor's Name)					
(Address)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
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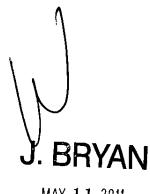
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SECRETARY OF STATE
SECRETARY OF STATE



MAY 11 2011

EXAMINER

COVER LETTER

то:	Registration S Division of Co				
SUBJECT: The Panac			he Concierge,LLC		
		Name of Lim	ited Liability Company		
The end	closed Articles of	f Amendment and fee(s) are sul	bmitted for filing.		
Please	return all corresp	ondence concerning this matter	r to the following:		
Justyna Michalowska					
			Name of Person		
		Firm/Company			
		P.O. Box 301		HAY 10 PH 2: 42 SECRETARY OF STATE SECRETARY OF STATE	
			Address		MI IO PH 2: CATASSEE, FLT CATASSEE, FLT
			Nokomis, FL 34274		いる。
·			City/State and Zip Code		FES ?
		E-mail address: (chalowska@gmail.com to be used for future annual report no	otification)	ORIGE 5
For fur	ther information	concerning this matter, please o	call:		
		na Michalowska	at (941)	375-4050	<u>-</u>
	Name (of Person	Area Code & Dayt	ime Telephone Number	
Enclose	ed is a check for t	the following amount:			
\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclose	sed) Certified	te of Status &
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327		STREET/COU Registration Sec Division of Corp Clifton Building	oorations		

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 17, 2011

JUSTYNA MICHALOWSKA PO BOX 301 NOKOMIS, FL 34274

SUBJECT: THE PANACHE CONCIERGE, LLC

Ref. Number: L09000025851



We have received your document for THE PANACHE CONCIERGE, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is #:L78304, PANACHE, INC...

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 211A00006547

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SECONO SECONO	1
SECRETARY OF	NED STATE
FLORIDE	-

The Par	nache Concierge, LL	C	- SP 5
(<u>Name of the Limited Liabi</u> (A Flori	ility Company as it now appea da Limited Liability Company)	<u>rs on our records.</u>)	and the second
The Articles of Organization for this Limited Liability	y Company were filed on	03/16/2009	and assigned
Florida document number L09000025851	.		
This amendment is submitted to amend the following	:		
A. If amending name, enter the new name of the l	imited liability company her	<u>re</u> :	
	Panache, LLG Pano	acho Inten	national 110
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Compa	any," the designation "I	LC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AD	DRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
		·	
B. If amending the registered agent and/or reg		our records, <u>enter (</u>	he name of the new
registered agent and/or the new registered office a	ddress here:		
Name of New Registered Agent:			
New Registered Office Address:			
	ter Florida street ada	ress	
 -	City		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 of 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 **Type of Action Title** <u>Name</u> **Address** ☐ Add Remove Remove _ Add Remove ∏ Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) March 14 2011 Dated_ Signature of a member or authorized representative of a member

Page 2 of 2

Filing Fee: \$25.00

Justyna Michalowska
Typed or printed name of signee