

L 06000105153

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(City/State/Zip/Phone #)

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JUL 11 2012

EXAMINER



400237198974

400237198974
07/10/12--01022--004 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 JUL 10 PM 1:51

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Couleur provence LLC
Name of Limited Liability Company

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
12 JUL 10 PM 1:51

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Philippe Partouche
Name of Person
WBSTC LLC
Firm/Company
20118 Ocean Key drive
Address
Boca Raton, FL 33498
City/State and Zip Code
partouche.p@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Philippe Partouche at (**561**) **929 0113**
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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Couleur provence LLC

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

FILED
STATE
SECRETARY OF CORPORATIONS
DIVISION
12 JAN 10 PM 1:51

The Articles of Organization for this Limited Liability Company were filed on 10/30/2006 and assigned
Florida document number L06000105153.

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 "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

_____, Florida _____

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

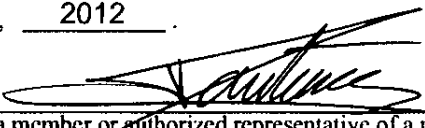
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Philippe Partouche	20118 Ocean Key drive Boca Raton, FL 33498	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	WBSTC LLC	20118 Ocean Key drive Boca Raton, FL 33498	<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
			<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.)*

Dated July 5, 2012



Signature of a member or authorized representative of a member
Philippe Partouche

Typed or printed name of signee

Certificate

No 02

Issued to

Name Philippe Partouche

Dated

October 30, 2006

Address

ORGANIZED UNDER THE LAWS OF
THE STATE OF FLORIDA

No 02

INTEREST
50%

VOID

Membership Certificate

COULEUR PROVENCE, LLC

VOID

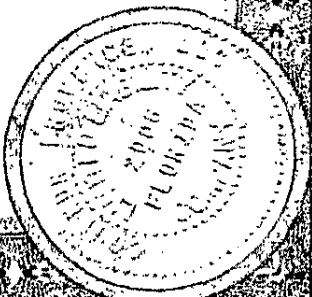
This Certifies that Philippe Partouche

50% is a member of Couleur Provence, LLC, with a member's interest of 50%, and is entitled to the full benefits and privileges of such membership, subject to the duties and obligations, as more fully set forth in the Limited Liability Company Operating Agreement.

In Witness Whereof, Couleur Provence, LLC has caused this Certificate to be executed by its duly authorized Manager, Member this 30th day of October, 2006 and its Limited Liability Company, but, if any, to be hereto affixed.

[Signature]
MANAGER/MEMBER

[Signature]
MANAGER/MEMBER



COULEUR PROVENCE, LLC

Certificate

No 03

Issued to

Name

Dated

Address

ORGANIZED UNDER THE LAWS OF
THE STATE OF FLORIDA

50%

No 03

INTEREST


Membership Certificate

COULEUR PROVENCE, LLC

This Certifies that WBSTC LLC

is a member of Couleur Provence, LLC, with a member's interest of 50% and is entitled to the full benefits and privileges of such membership, subject to the duties and obligations, as more fully set forth in the Limited Liability Company Operating Agreement.

In Witness Whereof, Couleur Provence, LLC has caused this Certificate to be executed by its duly authorized Manager, Member this 26 day of June 20 2012 and its Limited Liability Company, Ltd. if any, to be hereunto affixed.


 MANAGER/MEMBER

MDide

 MANAGER/MEMBER