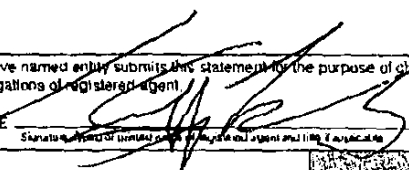


FILED
03 AUG 27 PM 4:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AMENDMENT

2003 LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00000008013			
1. Entity Name PAMELA ARMS, L.L.C.			
Principal Place of Business 1782 EAST TRAFALGAR CIRCLE HOLLYWOOD, FL 33020		Mailing Address 1782 EAST TRAFALGAR CIRCLE HOLLYWOOD, FL 33020	
2. Principal Place of Business 1270 Grant St. Suite, Apt. #, etc.		3. Mailing Address 1270 Grant St. Suite, Apt. #, etc.	
City & State Hollywood, FL		City & State Hollywood, FL	
Zip 33019	Country	Zip 33019	Country
4. FEI Number 65-1022192		☒ Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required			
6. Name and Address of Current Registered Agent FEINBERG, JEFFREY ESQ. 4000 HOLLYWOOD BLVD. SUITE 350, NORTH TOWER HOLLYWOOD, FL 33021		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of, registered agent.			
SIGNATURE 		DATE	
Make Check Payment to: ADJF/REGS , Department of State Due By: May 1, 2005			
9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP MGRM BISHOP, MILICA M 1782 EAST TRAFALGAR CIRCLE HOLLYWOOD, FL 33020 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP MGRM Markovic, Milica 1270 Grant St. Hollywood, FL 33019 ☒ Change ☐ Addition	300022609893	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TITLE NAME STREET ADDRESS CITY - ST - ZIP		
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.			
SIGNATURE: <i>Luticia Lyachovic</i>		8/26/03 (954) 920-9020	

NR



☐ CHECK HERE IF MAKING CHANGES

AMENDED
2003
UBR

CR2003 (10/02)



CORPORATION SERVICE CO

LO0000008013

ACCOUNT NO. : 072100000032

REFERENCE : 220154 83810A

AUTHORIZATION :

Patricia Pizeto

COST LIMIT : \$ 50.00

ORDER DATE : August 26, 2003

ORDER TIME : 9:14 AM

ORDER NO. : 220154-005

CUSTOMER NO: 83810A

CUSTOMER: Ms. Shannon Pollitt
Feinberg & Maidenbaum
Suite 350 4000 Hollywood
Blvd., North Tower
Hollywood, FL 33021

BK

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TALLAHASSEE, FLORIDA

03 AUG 27 PM 4:50

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ANNUAL REPORT FILING

NAME: PAMELA ARMS, L.L.C.

RECEIVED
03 AUG 27 AM 10:43
DIVISION OF CORPORATION

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward-EXT#1135

EXAMINER'S INITIALS: _____

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