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D. BRUCE

APR 28 2008

**EXAMINER** 

## **COVER LETTER**

ection rporations							
ROYAL PANEL	- DESIGN , LLC						
(Name of Lir	mited Liability Company)						
Amendment and fee(s) are su	ubmitted for filing.						
ondence concerning this matte	er to the following:						
Roy	O. LIM						
	(Name of Person)						
ROYAL P	ANEL DESIGN, LLC						
	(Firm/Company)						
1128 ROYA							
	(Address)						
ROYAL DA	LM BEACH FL 33411						
1 1 1 1 1 1 1	(City/State and Zip Code)						
	SECALL						
concerning this matter, please	call:  at (561) 7(8-6079  (Area Code & Daytime Telephone Number) FLORIDA  (Area Code & Daytime Telephone Number)						
	ASS 25						
	at (561) 7(8-6079 SA						
of Person)	(Area Code & Daytime Telephone Number)						
	LOR E: I						
he following amount:	DA I						
	\$55.00 Filing Fee & \$60.00 Filing Fee,						
Certificate of Status	Certified Copy Certificate of Status &						
	(additional copy is enclosed) Certified Copy (additional copy is enclosed)						
ING ADDRESS:	STREET/COURIER ADDRESS:						
ration Section on of Corporations	Registration Section Division of Corporations						
	ROYAL PANEL (Name of Lin Amendment and fee(s) are so Indence concerning this matter ROYAL PA  ROYAL PA  ROYAL PA  Oncerning this matter, please of Person)  The following amount:  \$30.00 Filing Fee & Certificate of Status  ING ADDRESS: ation Section						

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ROYAL							
( <u>Name of the Limited</u> (A	Liability Com Florida Limite	pany as it red Liability (	now appea Company)	rs on our rec	cords.)		
The Articles of Organization for this Limited Li	ability Compa	any were fil	led on	2-13-	06	and ass	_
Florida document numberL 660 000 157	41				A	15E 08	Sara Sara
This amendment is submitted to amend the following	owing:					OB APR 25 THE SEGRETARY SEE	
A. If amending name, enter the new name of	the limited l	iability con	npany he	<u>re</u> :		)F STI	
The new name must be distinguishable and end wit	h the words "L	imited Liab	ility Comp	any," the desi	gnation "LI	LC' for the a	bbreviation
"L.L.C."						•	
B. If amending the registered agent and/or registered agent and/or the new registered of	_	nere:	dress on		s, <u>enter th</u>	<u>e name o</u>	f the new
Name of New Registered Agent:					<u> </u>		
New Registered Office Address:	1/28	ROYAL		BEACH			324
(Enter Florida ROYAL PALM BEACH, F (City)							
	ROYAL	PALM	BEAG	<u>′</u> , Fi	lorida	334/1	
		(City)	_			(Zip Cod	(e)

## 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Mana MGRM = Ma	ger naging Member	• ·	
<u>Title</u>	Name	Address	Type of Action
MGR	ROY O. LIM	1128 ROYAL PALM BEACH, FOYAL PALM BEACH, F	Remove
			Add Remove
<del></del>			Add Remove
			Add Remove
			Add Remove
			AddRemove
D. If amendin	ng any other information, ent	er change(s) here: (Attach additional sheets, if necess	sary.)
			08 APR
Dated	APRIL 22	, 2008	25 PH
	She	a prember or authorized representative of a member	4: 11 ORIDA
-	Signature of	NELYN T. LIM  Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00