L06000071966

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JAN - 8

EXAMINER

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT

Exquisite Services, 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:

Gwendolyn P. Greene

Name of Person

Exquisite Services, LLC

Firm/Company

2320 Rockford Drive

Address

Chipley, FL 32428

City/State and Zip Code

tuckson@earthlink.net

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

For further information concerning this matter, please call:

Gwendolyn P. Greene

 $_{at}$ (850) 896-0379

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

(Name of the Limited I	Liability Compa Florida Limited L	ny as it now appears on our records.) liability Company)	
The Articles of Organization for this Limited Lia Florida document number <u>L6000071966</u>	bility Company	were filed on 18 July 2006	and assigned
This amendment is submitted to amend the follow	wing:		FILE SECRETARY
A. If amending name, enter the new name of	the limited liab	ility company here:	PH 3:
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ted Liability Company," the designation "	LLC" of the abbreviation
Enter new principal offices address, if applicable:		2320 Rockford Drive	
(Principal office address MUST BE A STREET		Chipley, Florida 32428	
Enter new mailing address, if applicable:		2320 Rockford Drive	
(Mailing address MAY BE A POST OFFICE BOX)		Chipley, Florida 32428	
B. If amending the registered agent and/o registered agent and/or the new registered off Name of New Registered Agent: New Registered Office Address:		e: Gwendolyn P. C	areene
	Chipley	, Florida 3	2428
		, riorida	Zin Code

New Registered Agent's Signature, if changing Registered Agent:

Exquisite Services, LLC

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.

Huendoly P. Heene
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 = Manager MGRM = Managing Member

<u>Name</u>	Address	Type of Action
Christina Rice Lane	109 Oak Ridge PI	Add
	Panama City Beach	Remove
	FL 32408	
Jeffrey Michael Lane	109 Oak Ridge Pl	Add
	Panama City Beach	Remove
	FL 32408	
Gwendolyn P. Greene	2320 Rockford Dr.	Add
	Chipley, FL 32428	Remove
David R. Greene	2320 Rockford Dr.	
	Chipley, FL 32428	Remove
	TALLAHAS SEE. FLORIDA	3 3 111
	Jeffrey Michael Lane Gwendolyn P. Greene	Christina Rice Lane 109 Oak Ridge PI Panama City Beach FL 32408 109 Oak Ridge PI Panama City Beach FL 32408 Gwendolyn P. Greene 2320 Rockford Dr. Chipley, FL 32428 David R. Greene 2320 Rockford Dr. Chipley, FL 32428

D. If amending any other information, er	nter change(s) here: (Attach additional sheets, if necessary.)
-	
Dec 27	2012
	Charl
Signature of	of a member or authorized representative of a member
Christina Rice Lane	
	Typed or printed name of signce

Page 3 of 3

Filing Fee: \$25.00

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