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C. LEWIS

DEC - 6 2012

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

Panther Management 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:

Jeff Krinsky

Name of Person

Panther Management Services LLC

Firm/Company

333 South Miami Avenue, Suite 150

Address

Miami, Florida 33130

City/State and Zip Code

jkrinsky@pantheroffice.com

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

For further information concerning this matter, please call:

Jeff Krinsky

305 374-5455

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 SECRETARY OF STATE OF ORGANIZATION OF CORPORATIONS **OF**

2012 DEC -4 AM 11: 49

Panther Management Sei	vices	LLC
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(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

(1	A I lorida Emilica Elabi	anty company)	
The Articles of Organization for this Limited L Florida document number L070000694	iability Company we	ere filed on January 18, 2007 and assigned	
This amendment is submitted to amend the foll	owing:	•	
A. If amending name, enter the new name of	f the limited liability	y company here:	
The new name must be distinguishable and end wi"L.L.C."	th the words "Limited	Liability Company," the designation "LLC" or the abbreviation	
Enter new principal offices address, if applic	cable:		
(Principal office address MUST BE A STREE			
	_		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:	or registered office	e address on our records, enter the name of the new	
New Registered Office Address:	333 South Miami Avenue, Suite 150		
The Windsteller Chile Flathess.		Enter Florida street address	
	Miami	, Florida 33130	
		City Zip Code	
New Registered Agent's Signature, if changing	Registered Agent:		
the provisions of all statutes relative to the accept the obligations of my position as reg	proper and complete istered agent as pro registered office ad s change.	to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and ovided for in Chafter 608, F.S. Or, if this document is ddress, I hereby confirm that the limited liability	
		ng Registered Agent Signature of New Registered Agent	
	Page 1 of	f 3	

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:

SECRETARY OF STATE
OIVISION OF CORPORATIONS

MGR = Manager

MGRM = Managing Member

2012 DEC - 4 AM 11: 50

		ENIE DEC 4 MITTING	, •
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Daniel Sirlin	333 South Miami Avenue, Sui	te 150 Add
		Miami, Florida	33130 Remove
			Add
			Remove
			Add
			Remove
			Add
			Remove
			Add
			Remove
			Add
			Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if	necessary.) File SECRETARY DIVISION OF C	EÚ COF STATE ORPORATION
	2012 DEC -4	
November/28 2012		
Signature of a member or authorized representative of a member		
Typed or printed name of signee Page 3 of 3		_
Filing Fee: \$25.00		