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| Special Instructions to F | iling Officer:                          |             |
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SECRETARY OF STATE

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**EXAMINER** 

## **COVER LETTER**

| Division of Co                  | rporations . '                             | •  |   |
|---------------------------------|--|--|---|
| SUBJECT: Panda                  | Kitchen & Bath Expe                        | o Center of Palm Harbor,   | LLC   |
|                                 | (Name of Lim                               | ited Liability Company)  |   |
|                                 |  |  |   |
| The enclosed Articles of        | Amendment and fee(s) are sub               | omitted for filing.  |   |
| Please return all correspondent | ondence concerning this matter             | to the following:  |   |
|                                 |  |  |   |
|                                 | Xiang Huang                                | <del></del>  | <del></del>   |
|                                 |  | (Name of Person)   |   |
|                                 | Panda Kitchen and Bath                     |  |   |
|                                 |  | (Firm/Company)   |   |
|                                 | 3250 NW 77th CT                            |  | O9 K  |
|                                 |  | (Address)  | ARETARY AHASSE  |
|                                 | Doral, FL 33122                            |  |   |
|                                 | Doral, 1 C 33 122                          | (City/State and Zip Code)  | PHI2: 06  OF STATE E. FLORIDA   |
|                                 |  |  | D<br>112: 06<br>STATE<br>FLORID,  |
| For further information of      | concerning this matter, please c           | all:   | A 6   |
| Tingie Huang                    |  | at ( 305 ) 639-6010  |   |
| (Name                           | of Person)                                 | (Area Code & Daytime T   | elephone Number)  |
|                                 |  |  |   |
| Enclosed is a check for t       | he 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:

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**Registration Section** 

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

Panda Kitchen & Bath Expo Center of Palm Harbor, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 06/28/2007 and assigned Florida document number L07000067995 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Panda Kitchen & Bath of Pinecrest, LLC The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 12443 S. Dixie Hwy Enter new principal offices address, if applicable: Pinecrest, FL 33156 (Principal office address MUST BE A STREET ADDRESS) 3250 NW 77th Court Enter new mailing address, if applicable: Miami, FL 33122 (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)

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.

(City)

(Zip Code)

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:

|                       | Name                        | Address                                    | Type of Action       |
|-----------------------|-----------------------------|--|----------------------|
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| D. If amendin         | g any other information, en | ter change(s) here: (Attach additional she | eets, if necessary.) |
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|                       |                             |  | 12 IZ                |
| Dated <u>February</u> | / 24                        | , 2009                                     | PH 12: 06 OF STATE   |

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Filing Fee: \$25.00