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(Address)

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(Document Number)

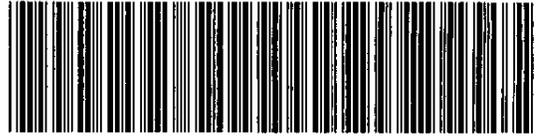
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 NOV 25 AM 10:09

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M. THOMAS

NOV 26 2008

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: LACE 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:

Ama Margues
(Name of Person)

LACE Services LLC
(Firm/Company)

1718 OAK Breeze Ave
(Address)

Kissimmee FL 34744
(City/State and Zip Code)

For further information concerning this matter, please call:

Ama Margues at (407) 920 0554
(Name of Person) (Area Code & Daytime Telephone Number)

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TALLAHASSEE FLORIDA

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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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 18, 2008

ANA MARQUES
1718 OAK BREEZE AVE.
KISSIMMEE, FL 34744

SUBJECT: L.A.C.E. SERVICES LIMITED LIABILITY COMPANY
Ref. Number: L08000087450

We have received your document for L.A.C.E. SERVICES LIMITED LIABILITY COMPANY and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas
Regulatory Specialist II

Letter Number: 308A00057554

SECRETARY OF STATE
TALLAHASSEE
FLORIDA

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

L.A.C.E. SERVICES 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 September 15, 2008 and assigned Florida document number LO 8000087450

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

LACE SERVICES LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1718 OAK Breeze Ave
Kissimmee FL 34744

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)

_____, Florida _____

(City)

(Zip Code)

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

MGR = Manager
MGRM = Managing Member

Title	Name	Address	Type of Action
MGR ALNP	ANA Marques	17180 AC Breeze Ave Kissimmee FL 34744	<input type="checkbox"/> Add <input type="checkbox"/> Remove
MGR ALNP	Zarina Quintana		<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

SECRETARY OF STATE
 TALLAHASSEE FLORIDA
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary)

I Need to change Company name from
L.A.C-S Services LLC to

LACE Services LLC

Do not use periods after each letter of LACE

Dated 11, 24, 2004.

ANA P. MARQUES ALNP
Signature of a member or authorized representative of a member

ANA P. MARQUES
Typed or printed name of signee

I paid \$30 dollars already