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DIVISION OF CORT OF ANTONS

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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: PANAChe LiFestyles 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:
39RON Hunsberger
PANAChe Lifestyles !!
2110 NE 39th St. SUAS
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Byron Hunsberger at (451) - 270-1302 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, 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

The Articles of Organization for this Limited Liability Company were filed on 6-26-2012 and assigned Florida document number <u>L12</u>000083833 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (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 registered agent and/or the new registered office address berg: the new registered agent and/or the new registered office address here: COM SHADE Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida

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 605, 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.

Cirv

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

	Manager - Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Byron Hunsberger	2110 NE 39+15+ SU	A & Add
	-7	2110 NE 39ths + Su Ft. Landerdale, FL3?	Remove
MCRM	Treat Martinez	888 Intercoastal Dr P	Change Change APT UE Add
		Ff. Lauderdele, Fl. 3330) [Remove
			☐ Change
			DIVISION OF CHEE CHATCHES
			Remove
			Change
			Add
			□ Remove
			Change
			☐ Remove
			Channe

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

or removed from our records:

	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Recirc to Color (Sacrat and MT2RM Rivor)	
	Registered agent and MERM, Bilon	
	HUNS Derger	
		
	DIVISION OF COIN CONTROL	
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	10×65	
Effe	ctive date, if other than the date of filing: (optional)	
(If an o <u>Note</u>	effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,020 or If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a	97 (3) is the
	ment's effective date on the Department of State's records.	
the n	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier one 90th day after the record is filed.	of:
Date	d (0 - 14 - 17)	
	Signature of a member of authorized representative of a member	
	BUTON Hunsberger	

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Filing Fee: \$25.00