

L12000052419

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

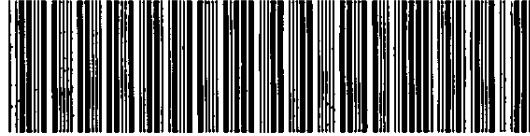
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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06/24/16--01017--012 \*\*35.00

16 JUL 13 AM 7:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 28, 2016

ENRIC SPENCE  
10010 SW 11TH STREET  
PEMBROKE PINES, FL 33025

SUBJECT: PANORAMIC HOME SOLUTIONS LLC  
Ref. Number: L12000152419

We have received your document for PANORAMIC HOME SOLUTIONS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers  
Regulatory Specialist II Supervisor  
Registration/Qualification Section

Letter Number: 616A00013536

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Panoramic Home Solutions LLC

DOCUMENT NUMBER: L12000152419

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Enric Spence

Name of Contact Person

Panoramic Home Solutions LLC

Firm/ Company

10010 SW 11th Street

Address

Pembroke Pines FL 33025

City/ State and Zip Code

info@panohomes.com

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

For further information concerning this matter, please call:

Enric Spence

Name of Contact Person

at ( 954 ) 553-2153

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$52.50 Filing Fee  
Certificate of Status  
Certified Copy  
(Additional Copy  
is enclosed)

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

# Panoramic Home Solutions

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or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Clyde Grey	7041 NW 25 <sup>th</sup> court	<input checked="" type="checkbox"/> Add
		Sunrise, Florida, 33313	<input type="checkbox"/> Remove
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SECURITY OF STATE  
PENTAGON FLOOR 04

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)

(If an 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 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated July 06, 2016, \_\_\_\_\_.

Sig

Signature of a member or authorized representative of a member

Enric Spence

Typed or printed name of signee