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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Creative Panache, LLC Nume 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:
L. Nichole Sims (aka LN Sims) Name of Person
Creative Panache, LLC
23110 State Road 54 Suite 211
Lutz, FL 33549 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (213) 766-1843 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fec

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

Creative Panache, (Name of the Limited Liability Complete (A Plorida Limited Liability Complete)	v as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company w	vere filed on 3.14.2017 and assigned
Florida document number <u>L 1700058300</u>	•
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability Creative Panache, LLC The new name must be distinguishable and contain the words "Limited Liability	•
Enter new principal offices address, if applicable:	23110 State Road 54
(Principal office address MUST BE A STREET ADDRESS)	Suite 211
	LUTZ FL 33549
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	23110 State Road 54 Suite 211 Lutz FL 33549
B. If amending the registered agent and/or registered office address here:	ce address on our records, enter the name of the new
Name of New Registered Agent:	\mathcal{N}
New Registered Office Address:	Enter Florida street address
·	, Florida
New Registered Agent's Signature, if changing Registered Agent:	City Zip Code
Thereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete peacept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office accompany has been notified in writing of this change.	erformance of my duties, and I am familiar with and ovided for in Chapter 605, F.S. Or, if this document is
If Changi	ng Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: MGR = Manager AMBR = Authorized Member MGR Victoria Cauthorn Suito 211 Lutz, FL 339490 Add _ Change □ Add ☐ Remove □ Remove ☐ Change ☐ Remove 🔲 Change □ Add

_□ Change

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Page 3 of 3

Filing Fee: \$25.00