



H130000972043

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Panache Beverage Inc.

Name of Corporation

**DOCUMENT NUMBER:** P05000000281

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jill Ehrlich, Paralegal

Name of Contact Person

Spector Gadon & Rosen, P.C.

Firm/Company

1635 Market Street, 7th FL

Address

Philadelphia, PA 19103

City/State and Zip Code

jehrllich@lawsgr.com

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

For further information concerning this matter, please call:

Jill Ehrlich

Name of Contact Person

at ( 215- 241-8833 )

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**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

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**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: Panache Beverage Inc.
- 2. The principal office address: 40 W. 23rd Street, 2nd FL  
New York, NY 10001
- 3. The mailing address (if different): \_\_\_\_\_
- 4. Date of incorporation/qualification: 1/03/05 Document number: P05000000281

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Michael Bongiovanni  
7951 SW 6th Street  
Suite 216  
Plantation FL 33324

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Nikki Sobel, Office Manager  
Spector Gadon and Rosen, LLP  
P.O. Box NOT acceptable  
360 Central Ave , Suite 1550 , St. Petersburg FL 33701

2013 MAY - 1 AM 10:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

\_\_\_\_\_  
Signature of an officer or director

James Dale, CEO  
Printed or typed name and title

*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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

Nikki Sobel  
Signature of Registered Agent

4/30/13  
Date

If signing on behalf of an entity:  
Nikki Sobel, Office Manager  
Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*