(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
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D. BRUCE MAY 27 2011 **EXAMINER**

COVER LETTER

TO:

TO:	Registration S Division of Co						
SUBJE	CT:	Fa	ab-X LLC				
		Name of Lim	ited Liability Company		-		
		f Amendment and fee(s) are sul	-				
i icase i	etuin an corresp	ondence concerning this matter	to the following:				
			David S Siegert		_		
			Name of Person				
			Fab-X LLC		_		
			Firm/Company		13-4 m	\rightrightarrows	
		1103A 53rd Ct S		17 kg			
			Address		ASS	73	
		Wes	Palm st Plam Beach FL 33407		EE.	70	
			City/State and Zip Code			PM 4: []	J
		E-mail address: (abxshop@gmail.com to be used for future annual report	notification)	ORIDA		
For furt	her information	concerning this matter, please of	eall:				
		vid S Siegert	at (561)	379-4540			
	Name	of Person	Area Code & Da	ytime Telephone Numb	er		
Enclose	ed is a check for t	the following amount:					
₹ 25.	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enc)	osed) Certific	Filing Fee, cate of Stated Copy onal copy	itus &	osed)
		ING ADDRESS:	STREET/CO Registration So	URIER ADDRESS:			
Registration Section Division of Corporations P.O. Box 6327		Division of Co Clifton Buildir	orporations				

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Fab	-X LLC			
(Name of the Limited Liability Com (A Florida Limite	npany as it now appears ed Liability Company)	s on our records.		
(**************************************	<i>,,</i>		,	
The Articles of Organization for this Limited Liability Compa	any were filed on	5-11-2011	and assigned	
Florida document number L11000055585				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited I	iability company here	: :		
The new name must be distinguishable and end with the words "L".L.C."	imited Liability Compar	ny," the designation	"LLC" or the abbreviation	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS	<u> </u>		E A T	
Enter new mailing address, if applicable:			E P	
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered registered agent and/or the new registered office address	office address on o here:	ur records, <u>ente</u>	the name of the nev	
Name of New Registered Agent:			· ***	
New Registered Office Address:	Ent	er Florida street a	ddress	
	City	, Florida _	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

<u>Title</u>	Name	<u>Address</u>	Type of Action
MGMF	R Kathryn J Goodwin	428 43rd St West Palm Beach Fl 33407	Add ✓ Remove
MGMF	David S Siegert	428 43rd St West Palm Beach FL 33407	Add Remove
	_		Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If ar	mending any other information, enter ch	nange(s) here: (Attach additional sheets, if necessary)	
		veen MGMR, MGR, and Registered agent	N 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
	happened to me. I have a loan re	ady to close for my business pending these	
	changes.	Discontinuo di Carante	
Dated _	May 25	2011. Stered	
	Signature of a me	mber or authorized representative of a member David S Siegert	
	T	yped or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00