# 117000201154

(Re	equestor's Name)	
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
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(Document Number)		
Certified Copies	Certificate:	s of Status
Special Instructions to Filing Officer:		
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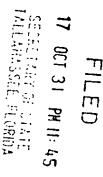
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October 11, 2017

THERESA PALMIERI 321 NW PEACOCK BLVD PORT SAINT LUCIE, FL 34986

SUBJECT: FANCY FAUCETS AND FIXTURES LLC

Ref. Number: L17000201154

We have received your document for FANCY FAUCETS AND FIXTURES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please type or print name of signee.

Please return 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.

Letter Number: 617A00020545

Dionne M Pijeaux Regulatory Specialist

www.sunbiz.org

Division of the property of th

## **COVER LETTER**

то:	Registration Section Division of Corporations	C4700	020/154)
SUBJ	ECT: Fancy Foucets Name of Limited	and Fixtu d Liability Company	restlc.
The en	nclosed Articles of Amendment and fee(s) are submi	tted for filing.	
Please	e return all correspondence concerning this matter to	the following:	
	Theresa	Palmieri Name of Person	<u></u>
	Faricy Fac	icets and	fixtures
	Bal NW	PeacoCK 1	304/evarD
	POSTSain	Tude, Fl	34986
	fancutouc	City/State and Zip Code  Let Sand Let X Let  be used for future annual report notifi	was Com
For fu	in ther information concerning this matter, please call.	:	
	Theresa frymieri	at ( <u>913)</u> <u>9 45</u> Area Code Daytime	: Telephone Number
1	sed is a check for the following amount: 25.00 Filing Fee	□ \$55.00 Filing Fee & Certified Copy	□ \$60.00 Filing Fee. Certificate of Status &
	v Crimvac of Graus	(additional copy is enclosed)	Certified Copy raddition if copy is enclosed)

### MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 323-4

# STREET/COURIER ADDRESS:

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

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

Fancy Faucet	3 and Fixtures LCC
Name of the Limited Liabil (A Florid	ity Company as it now appears on our records.) a Limited Liability Company)
The Articles of Organization for this Limited Liability C	Company were filed on $\frac{9/23/26/7}{4}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lim	ited liability company here:
The new name must be distinguishable and contain the words "I in	nited Liability Company," the designation "Lt.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
Enter new principal offices address, if applicable: ( <u>Principal office address MUST BE A STREET ADDI</u>	RESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BON)	TILED  OT 31 PN III: 45  THASSEE PLORIDA
B. If amending the registered agent and/or registered agent and/or the new registered office add	stered office address on our records, <u>enter the name of the new</u> ress here:
Name of New Registered Agent:	
New Registered Office Acdress:	Enter Florida street add-css
	, Florida
<del></del>	City Zip Code

New Registered Agent's Signature, if changing Registered Agent:

Thereby 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 ! 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 c change in the registered office address. Thereby 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 Authorized Ferson(s) authorized to manage, enter the title, name, and address of each person-being added or removed from our records:

MGR = Manager

AMBR = Aut	thorized Member		
Title	Name	Address	Type of Action
AMBR	Jony SR.	321 NK Peacock Back	IARE Add
·	1	Port-Saint Lucie, FL3	9/986 1/2⊡ Remove
			Change
AMBR	Theresa Palmieri	321 NW Peacock Boylet	Add
<u> </u>		321 NW Peacock Bouler Port SainTLucie, FL	34986 □ Remove
			Change
			D Add
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			🗖 Change
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			Remove
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			🗆 Add
			🗆 Remove
			Change
			□ Add
			□ Remove
			Change

Oct. 31. 2017 1:56PM St. Lucie West Sr 772 873 5048  If amending any other information, enter change(s) here: (Attach additional sheets, if no	No. 9705 ecessary)	f. 4
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Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days af Note: If the date inserted in this block does not meet the applicable statutory filing requirements, t document's effective date on the Department of State's records.	otional) fler filing.) Pursuant to 6 this date will not be li	05.0207 (3)(b) sted as the
the record specifies a delayed effective date, but not an effective time, at 12:01 ) The 90th day after the record is filed.	l a.m. on the ear	lier of:
Dated		
Signature of a member or authorized representative of a member		
Anthouv Renno		

Page 3 of 3

Filing Fee: \$25.00

ATTN: Judy

Thanks for your assistance

2017 06T 31 AH 19: 03

Fax # 850-245-6030

Please call Therese if there is Still an issue - 973-945-2911