

L17000201154

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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*[Signature]*  
10/12/17

FILED  
17 OCT 31 PM 11:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

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.

Dionne M Pijaux  
Regulatory Specialist

Letter Number: 617A00020545

## COVER LETTER

TO: Registration Section  
Division of Corporations

(47000201154)

SUBJECT: Fancy Faucets and Fixtures LLC.  
Name 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:

Theresa Palmieri  
Name of Person

Fancy Faucets and fixtures  
Firm/Company

321 NW Peacock Boulevard  
Address

Port Saint Lucie, FL 34986  
City/State and Zip Code

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

For further information concerning this matter, please call:

Theresa Palmieri at ( 973 ) 945-2911  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

### MAILING ADDRESS:

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32304

### 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

Fancy Faucets and Fixtures LLC  
(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 9/28/2017 and assigned  
Florida document number L1700020154.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_

Enter Florida street address

\_\_\_\_\_, Florida \_\_\_\_\_  
City 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 605, 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 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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AMBR	Tony SR.	321 NW Peacock Boulevard	<input type="checkbox"/> Add
		Port Saint Lucie, FL 34986	<input type="checkbox"/> Remove

			<input checked="" type="checkbox"/> Change
AMBR	Theresa Palmieri	321 NW Peacock Boulevard	<input type="checkbox"/> Add
		Port Saint Lucie, FL 34986	<input type="checkbox"/> Remove

			<input type="checkbox"/> Change
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			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
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STATE OF FLORIDA  
TALLAHASSEE

FILED  
17 OCT 31 PM 11:45  
ST. LOUIS, MISSOURI  
FBI

(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)

Dated 10/2, 17

Signature of a member or authorized representative of a member

Anthony Renno

Typed or printed name of signee

ATTN: Judy

Thanks for  
your assistance

2017 OCT 31 AM 12:03

10/31/17 1:56 PM



Fax # 850-245-6030

Please call Theresa if there is  
still an issue - 973-945-2911