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(Req	uestor's Name)
(Addi	ress)	
(Addi	ress)	
(City/	/State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
(Busi	iness Entity Na	ime)
(Doc	ument Number	·)
Certified Copies	Certificate	es of Status
Special Instructions to Fi	iling Officer:	





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D SCOTT MAY 29 2019

COVER LETTER

4:

TO: Registration Se Division of Cor				
SUBJECT:	Fancy Cabin	ets_LLC ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Guilhe	Name of Person		>
		Firm/Company		۔۔ > ح
	1275 Sou	thwest 4th Aver	nue	က္ လ
	Delray R. gui@d.	City/State and Zip Code abelgroup.com to be used for future annual report notif	ication)	
For further information of	concerning this matter, please co		,	
Guilher	me Falabella of Person	at (<u>407)</u> 999 Area Code Daytime	-6272 Telephone Number	_
Enclosed is a check for t	he following amount:			
\$25.00 Filing Fee	☐ \$30,00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Certificate o Certified Co (additional copy	f Status & py
	JNG ADDRESS: ration Section	STREET/COURI Registration Section		

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Fancy C.	abinets LLC	
(Name of the Limited Liabilit	y Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Coronaction of the Articles of Organization for this Limited Liability Coronaction of the Articles of Organization for this Limited Liability Coronaction of the Articles of Organization for this Limited Liability Coronaction of the Articles of Organization for this Limited Liability Coronaction for the Liability for the Liabil		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ted liability company here:	
The new name must be distinguishable and contain the words "Limi		
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET ADDR	(ESS)	
		<u> </u>
		1.9 1.9
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office add		er the name of the nev
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 Type of Action Address Title Name Falabella Services LLC 1275 Southwest 4th Avenue Add MGR Delray Beach, FL 33444 XRemove _____ Change Guilherme Falabella 601 Heritage Dr., Ste 135 DANN AMBR Jupiter, FL 33458. __ Remove MGR Rodrigo Mathias 1275 Southwest 4th Avenue Radd To Delvay Beach, FL 33444 Bremove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change \square Add ☐ Remove

□ Change

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on effective date is li ote: If the date in	other than the date isted, the date must be sp iserted in this block de- re date on the Departn	ecific and cann ses not meet t	iot be prior to da the applicable	ate of filing or m statutory filing	ore than 90 days :	ptional) ifter filing. this date	Pursuant to will not be	605.020 listed a
	ies a delayed effe after the record is		, but not ar	n effective t	me, at 12:0	1 a.m. (on the ea	rlier (
nted <u>Ma</u>	y 1900/2	·_6	2019					

Page 3 of 3

Filing Fee: \$25.00