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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

FAGLAMOROUS LLC	
CID ICC TA	
SUBJECT: 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:	
FARRAH JEANTINOBLE	
Name of Person	
FAGLAMOROUS LLC	
Firm/Company	
248 GAZETTA WAY	
Address	
WEST PALM BEACH, FL 33413	
City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	G)
FARRAH JEANTINOBLE 561 779-7211	•
Name of Person	
	.7
Enclosed is a check for the following amount:	j
■ \$25.00 Filing Fee	
Mailing Address: Registration Section Street Address: Registration Section	
Division of Corporations Division of Corporations	
P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FAGLAMOROUS LLC			
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Compan	y were filed on 12/20/2019	and ass	signed
Florida document number L19000299905			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	bility company here:		
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation "LLC" or the at	obreviation "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)			
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the nan	ne of the ne	w registere (;)
Name of New Registered Agent:		,	•
		5	
New Registered Office Address:	Enter Florida street address	<u> </u>	
	. Florida	===	j
	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 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>	Address	Type of Action
MGR	FARRAH JEANTINOBLE	248 GAZETTA WAY	= Add
		WEST PALM BEACH, FL 33413	□Remove
			□ Change
			□Add
			□Remove
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Effective date, if other than the date of filing: (option		
Effective date, if other than the date of filing:	ling.) Pursuant te	o 605.0207 (3) : listed as the
the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) cord is filed.	The 90th day	after the
Dated () (1) 4 5 2021.		
Signature of a member or authorized representative of a member	,	_
,		

Filing Fee: \$25.00