

L21000390251

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

09/28/2021
H/C

Office Use Only



700373176287

09/17/21--01004--001 **25.00

FILED
2021 SEP 17 AM 12:54
SECRETARY OF STATE
TALLAHASSEE, FL 32310

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WORLD OF CABINETS 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:

Jorge A Pena Romero

Name of Person

WORLD OF CABINETS LLC

Firm/Company

4582 Sheringham Ct

Address

City/State and Zip Code

Springhill FL 34609

E-mail address; (to be used for future annual report notification)

For further information concerning this matter, please call:

Jorge A Pena Romero

813 298-7731
at (_____) _____
Area Code Daytime Telephone Number

Name of Person

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FILED

2021 SEP 17 AM 12:54

WORLD OF CABINETS LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 09/01/2021 and assigned
Florida document number 1.21000390251.

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)

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

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 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>
PRES	PENA DE ARMAS JORGE F	4389 PURITAN LN	<input type="checkbox"/> Add
		SPRING HILL, FL 34608	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	JORGE A PENA ROMERO	4582 SHERINGHAM CT	<input checked="" type="checkbox"/> Add
		SPRING HILL, FL 34609	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	JORGE F PENA DE ARMAS	4389 PURITAN LN	<input checked="" type="checkbox"/> Add
		SPRING HILL, FL 34608	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	KARLA N PENA	4582 SHERINGHAM CT	<input checked="" type="checkbox"/> Add
		SPRING HILL, FL 34609	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(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)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

SEPTEMBER 12, 2021



Signature of a member or authorized representative of a member

Typed or printed name of signee

Jorge A Pena Romero

Cell: 813-298-7731

Email: jorgeapena02@gmail.com

Address: 4582 Sheringham Ct Spring Hill, FL 34609