

10/28/2014 12:20:35 From: To: 8506176380

( 1/3 )

Division of Corporations

**F10000001046**

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Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

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To:

Division of Corporations  
Fax Number : (850) 617-6380

From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 222-1092  
Fax Number : (850) 878-5368

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

**Email Address:** \_\_\_\_\_

**REGISTERED AGENT CHANGE  
LUXURY HOME SOLUTIONS, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

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14 OCT 28 PM 1:30

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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14 OCT 28 AM 10:05

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

### COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Luxury Home Solutions, Inc.

\_\_\_\_\_  
Name of Corporation

**DOCUMENT NUMBER:** F10000001046

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Marco Kozlowski

\_\_\_\_\_  
Name of Contact Person

Luxury Home Solutions, Inc

\_\_\_\_\_  
Firm/Company

3956 Town Center Blv Suite 251

\_\_\_\_\_  
Address

Orlando, Florida 33837

\_\_\_\_\_  
City/State and Zip Code

Marco.kozlowski@gmail.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Marco kozlowski

702

588-4950

\_\_\_\_\_  
Name of Contact Person

at ( ) \_\_\_\_\_  
Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

CR2E045 (03/12)

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS**

*Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: Luxury Home Solutions, Inc.
2. The principal office address: 3956 Town Center Blvd Suite 251, Orlando, FL 32837
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 03/01/2010 Document number: F10000001046
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Karen Witham

3956 Town Center Blvd, #251

Orlando, FL 32837

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

CT Corporation System

c/o CT Corporation System, 1200 South Pine Island Road

P.O. Box NOT acceptable

Plantation, Florida 33324

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

Marco Kozlowski

Printed or typed name and title

*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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

By: Ausha Arnold

Signature of Registered Agent

10/24/2014  
Date

If signing on behalf of an entity:

Ausha Arnold

Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (03/12)

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