# 10700056806

| (Requestor's Name)                      |  |  |
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| Special Instructions to Filing Officer: |  |  |
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Office Use Only



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D. BRUCE

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**EXAMINER** 



### FLORIDA DEPARTMENT OF STATE Division of Corporations

October 27, 2010

MARIA SAPIKAS PAKMAIL 4301 S. FLAMINGO RD. STE 106 DAVIE, FL 33330

SUBJECT: LUXURIA INVESTMENTS, LLC

Ref. Number: L07000056806

We have received your document for LUXURIA INVESTMENTS, 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):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 810A00025369

FILED

10 NOV 15 AM 9: 44

## COVER LETTER Registration Section TO: **Division of Corporations** The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Area Code & Daytime Telephone Number Enclosed is a check for the following amount: \$25.00 Filing Fee \$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy

1

MAILING ADDRESS:

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

#### STREET/COURIER ADDRESS:

(additional copy is enclosed)

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| LUXURIA IV   | westments, 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  Florida document number   | AL A                           |  |
| This amendment is submitted to amend the following:  | EFF S  |  |
| A. If amending name, enter the new name of the limited liabil  | lity company here:   |  |
| The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."  |  |  |
| Enter new principal offices address, if applicable:  | 2114 N. Flamingo Road.   |  |
| (Principal office address MUST BE A STREET ADDRESS)  | Pembroke Pine tz33028  |  |
| Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  | 2114 N. Flauings Road.<br>Pembroke Pins #2 33028.                  |  |
| 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:  | iA E. VILANOVA.  |  |
| New Registered Office Address: 2114  | M. Flamingo Road   |  |
| Rembra   | Enter Florida street address  City  Enter Florida 33028.  Zip Code |  |
| No. 19 and April 4 and April 44 Clause and College and |  |  |

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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member **Title** <u>Name</u> **Address Type of Action** ☐ Add Remove ☐ Add Remove ☐ Add Remove Add 🔲 Remove ∐Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Signature of a member or authorized representative of a member

WARIA VILANOVA

Typed or printed name of signee

Dated

Page 2 of 2

Filing Fee: \$25.00