# L10000001672

(Requestor's Name)	•	
(Address)	•	
(Address)	•	
(City/State/Zip/Phone #)	•	
PICK-UP WAIT MAIL		
(Business Entity Name)	<b>R-</b>	
(Document Number)	•	
Certified Copies Certificates of Status		
Special Instructions to Filling Officer:  GILLIAM GAVE  AUTHORIZATION BY PHONE TO  CORRECT to Remove his name  DATE as Pimarired  DOC. EXAM.  7/1/10	15.29	kred

Office Use Only



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10 JUL -7 AH 9: 33
SECRETARY OF STATE
AND AHASSEE, FLORIDA

## **COVER LETTER**

Division of Co	rporations		
SUBJECT:	Lavish	Listings, LLC	•
		ted Liability Company	
			1
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	•
		Jafar George	:
		Name of Person	1
		Lavish Listings, LLC	
		Firm/Company	
		1801 N. Flagler Dr	
		Address	•
	. Wes	st Palm Beach, Fl, 33407	
		City/State and Zip Code	
•	е е	lliottg34@yahoo.com to be used for future annual report notific	
	E-mail address: (	to be used for future annual report notific	cation)
For further information	concerning this matter, please of	eall:	
J;	afar George	at (_979 )	216-6132
Name of Person at (979) 216-6132  Area Code & Daytime Telephone Number		Telephone Number	
Enclosed is a check for t	the following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

TO:

Registration Section

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

## STREET/COURIER ADDRESS:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

10 JUL -7 AM 9: 33

SECRETARY OF 0-

•	Lavish Listii	ngs, LLC	SECRETARY TALLAHASSE s on our records.)	OFSTATE
(Name of the Limited (A	<b>Liability Compan</b> Florida Limited Li	y as it now appear ability Company)	s on our records.)	E. FLORIDA
The Articles of Organization for this Limited Li Florida document number L10000000	ability Company v		01/04/2010	and assigned
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name of	the limited liabi	lity company her	<b>e:</b> 1	
The new name must be distinguishable and end wit. "L.L.C."	h the words "Limite	ed Liability Compa	ny," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applica	able:	N/A		
(Principal office address MUST BE A STREE	T ADDRESS)	T		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE)	<u>BOX)</u>	NA	1	
B. If amending the registered agent and/or registered agent and/or the new registered of			our records, <u>enter t</u>	he name of the new
Name of New Registered Agent:	Jafa	ir Geor	ige	
New Registered Office Address:	1801	N. Fla	G Lev DV ter Florida street add	1
	West	$\alpha$ 1 $\alpha$	M. , Florida	33407 Zip Code
N. D. Harris A. and Clauston & character F		*		•

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 = M	lanaging Member		
Title .	<u>Name</u>	Address	Type of Action
MGR/P	Jafar George	1801 N. Flagler Dr. West Palm Beach	Add Remove
			Add Remove
mar/P	Gilliam Elliott		Add · Remove
			Add Remove
			Add Remove
<del></del>			Add Remove
D. If amend	ding any other information, enter change	(s) here: (Attach additional sheets, if necessary.)	
		TALLAHASS	FIL 10 JUL -7
	( /0.2/ ( )	FLORID	AM 9: 33
Dated <u>O</u>	(2/28/10 ,	or authorized representative of a member	· • ·
		Gilliam Elliott or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00