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B. BOSTICK

JAN 14 2013

EXAMINER

COVER LETTER

TO:

Registration Section Division of Corporations

Luxury Lineup 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:

	Paul Carruth				
	,	Name of Person			
	Luxury Lineu	ıp LLC			
		Firm/Company			
	1934 Tigerta	il Blvd.			
		Address			
	Dania Beach	ı, FL 33004		13 JAN II I	
		City/State and Zip Code		AT P	-
	Paul@Luxuryline	up.com		ASS I	garssa 2
	E-mail address: (t	o be used for future annual report not	ification)		
For further information c	oncerning this matter, please ca	all:		PM 12: 5	i,
Paul Carrut	th	at (888) 470-68	350	2: 58 TATE ORIDA	
Name o	f Person	Area Code & Daytii	ne Telephone Number		
Enclosed is a check for the	ne following amount:				
□ \$25.00 Filing Fee	■\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy	□\$60.00 Filin Certificate	g Fee, of Status &	

Certified Copy

(additional copy is enclosed)

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

(additional copy is enclosed)

Certified Copy

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

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

Luxury Lineup LLC (Name of the Limited	d Liability Company as it now appea A Florida Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited L Florida document number L12000066668			•
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name of	of the limited liability company he	re:	
The new name must be distinguishable and end with.L.C."	ith the words "Limited Liability Comp	any," the designation "LLC" or the abbrevia	_ tio
Enter new principal offices address, if appli	cable:	Acc 3	
(Principal office address MUST BE A STREI	ET ADDRESS)	A A	<u>.</u>
		ASSEE, OF	1
Enter new mailing address, if applicable:	POIN	FLOR	
(Mailing address MAY BE A POST OFFICE	<u></u>	72 5 70 8 70 A	_
B. If amending the registered agent and registered agent and/or the new registered o	or registered office address on ffice address here:	our records, enter the name of the r	iev
Name of New Registered Agent:	INCORP SERVICES, INC	•	_
New Registered Office Address:	17888 67th Court North		
	Er	ter Florida street address	_
	Loxahahtchee	, Florida <u>33470</u>	
	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 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. Stillenken & Incop Senue Tire

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Saleh Nayab	4475 Amador Rd.	Add
		Freemont, CA 94538	Remove
MGRM	Mani Chilpayen	1934 Tigertail Blvd.	
		Dania Beach, FL 33004	Remove
MGR	Kimberly Reiss	100 Bayview Dr. #1016	Add
		Sunny Isles Beach, FL 3316	Remove
MGRM	Lam Vu	13062 Cypress St. #23	Add
		Garden Grove, CA 9284	Remove
		Ā	Add
		7 7 1	Remove P M
			PM 12 TANGE
			Remove

Carreth	
ature of a member or authorized representative of a member	
	 *

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Filing Fee: \$25.00

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