

# L12000149314

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

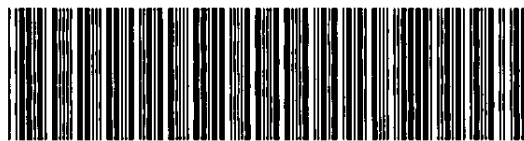
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500260366295

05/27/14--01009--012 \*\*25.00

FILED  
2014 MAY 27 PM 1:50  
CLERK OF COURT  
HALL COUNTY, GEORGIA

JUN 04 2014

J. BRUCH

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: **LUXBRAND INVESTMENTS 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:

**Maximilian Schenk, Esq.**

Name of Person

**Schenk & Associates, PLC**

Firm/Company

**999 Brickell Avenue, Suite 820**

Address

**Miami, FL 33131**

City/State and Zip Code

**sws@schenk-law.com**

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

For further information concerning this matter, please call:

**Stephan Schenk**

Name of Person

at **305** **444-2200**

Area Code

Daytime Telephone Number

Enclosed is a check for 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)

**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

2014 MAY 27 PM 1:50

FILED

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

LUXBRAND INVESTMENTS 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 were filed on November 28, 2012 and assigned Florida document number L12000149314.

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 end with 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)**

999 Brickell Avenue, Suite 820

Miami, FL 33131

Enter new mailing address, if applicable:

**(Mailing address MAY BE A POST OFFICE BOX)**

999 Brickell Avenue, Suite 820

Miami, FL 33131

**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:

Schenk & Associates, PLC - Counselors at Law

New Registered Office Address:

999 Brickell Avenue, Suite 820

Enter Florida street address

Miami

City

Florida

33131

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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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>
MGR	Lorenzo Locatelli	c/o NRAI Services Inc.	<input type="checkbox"/> Add
		515 E. Park Avenue	<input checked="" type="checkbox"/> Remove
		Tallahassee, FL 32301	
MGR	Johannes Badrutt	c/o LWS Group Corporation	<input checked="" type="checkbox"/> Add
		999 Brickell Avenue, Suite 820	<input type="checkbox"/> Remove
		Miami FL 33131	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove

2014 MAY 27 PM 1:30  
RECEIVED  
OFFICE OF THE  
STATE ATTORNEY  
TALLAHASSEE, FL  
FBI

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

---

---

---

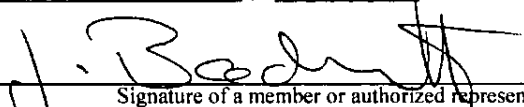
---

---

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ **(optional)**

*(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)*

Dated May 22, 2014

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

Johannes Badrutt

\_\_\_\_\_  
Typed or printed name of signee

Page 3 of 3  
Filing Fee: \$25.00

**FILED**  
2014 MAY 27 PM 1:50  
CLERK OF STATE  
TALLAHASSEE, FLORIDA