L12000 14914

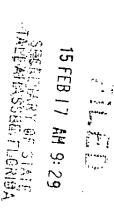
Requestor's Name)	
Address)	
Address)	
City/State/Zip/Phone #)	
☐ WAIT	MAIL
Business Entity Name)	
Document Number)	
Certificates of Sta	atus
to Filing Officer:	
	Address) Address) City/State/Zip/Phone #) WAIT Business Entity Name) Document Number) Certificates of Sta

Office Use Only



100269144561

02/17/15--01005--022 **25.00



James FEI 2 4 7015

COVER LETTER

TO: Registration Se Division of Cor	
LUXBRA	AND INVESTMENTS LLC
SUBJECT:	Name of Limited Liability Company
The enclosed Articles of	Amendment and fee(s) are submitted for filing.
Please return all correspo	ondence concerning this matter to the following:
	STEPHAN SCHENK
	Name of Person
	SCHENK & ASSOCIATES, PLC
	Firm/Company
	1001 BRICKELL BAY DRIVE, SUITE 1200
	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 c	oncerning this matter, please call:
Stephan Schenk	305 444-2200
Name o	f Person Area Code Daytime Telephone Number
Enclosed is a check for the	ne following amount:
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status 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

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

LUXBRAND INVESTMENTS LLC

(Name of	the L	imited	Liability	Comp	any as it	now ap	pears on	our record	s.)
		-7A	Florida	imited	Lightlity	Compa	may)		_

	(11 Florida Ellinoca Elli	ionity company)		
The Articles of Organization for this Limited Li Florida document number L12000149314	ability Company w	vere filed on 11/28/201	2 ar	nd assigned
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name of	the limited liabili	ity company here:		
The new name must be distinguishable and end with the	words "Limited Liabili	ity Company," the designation	"LLC" or the abbrevia	tion "L.L.C."
Enter new principal offices address, if applic	able:			
(Principal office address MUST BE A STREE	T ADDRESS)			
Enter new mailing address, if applicable:			AL ASS	15 FEB - 12 - 17 - 17 - 17 - 17 - 17 - 17 - 17
(Mailing address MAY BE A POST OFFICE	BOX)			
B. If amending the registered agent and/ registered agent and/or the new registered of			ords, enter the in	athe of the new
Name of New Registered Agent:	Schenk & As	sociates, PLC		
New Registered Office Address:	1001 Brickell	Bay Drive, Suite 120		
		Enter Florida street aa		
	Miami	C:-	, Florida <u>33131</u>	
New Registered Agent's Signature, if changing I	Registered Agent:	City	Zip (Code

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, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager

<u>`itle</u>	<u>Name</u>	Address	Type of Action
· · · · · · · · · · · · · · · · · · ·			Add
			☐ Remove
· · · · · · · · · · · · · · · · · · ·			□ Add
			□ Remove
			□ Remove
			15 FEB LED
			A Remove 7
			29
			Add
			□ Remove
			D Add
			□ Remove

Title: MGR	
Name and Addr	ress: Badrutt, Johannes
	1001 Brickell Bay Drive, Suite 1200, Miami FL 33131
	n the date of filing:(optional)
fective date must be specific te this document is filed by	e, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the Florida Department of State)
ective date must be specific	c, cannot be prior to date of receipt or filed date and cannot be more than 90 days after

Page 3 of 3

Filing Fee: \$25.00

SPEKET AM 9: 29

TAKE ANASSES FLORID