

Y SULKER

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: LUXURY ONE REALTY 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:

STUART ROSENBLUM

Name of Person

LUXURY ONE REALTY LLC

Firm/Company

20283 STATE ROAD 7, STE 300

Address

BOCA RATON, FL 33498

City/State and Zip Code

SROSENBLUM1018@GMAIL.COM

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

For further information concerning this matter, please call:

STUART ROSENBLUM

Name of Person

at (561) 445-0185

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

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

LUXURY ONE REALTY 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 01/09/2014 and assigned Florida document number L14000004939.

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 contain 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

STUART ROSENBLUM

X New Registered Office Address:

19558 SATURNIA LAKES DRIVE

Enter Florida street address

BOCA RATON

City

Florida 33498

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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person 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	TODD KEVITCH	9672 COBBLESTONE CREEK DRIVE	<input type="checkbox"/> Add
		BOYNTON BEACH, FL 33472	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	STUART ROSENBLUM	19558 SATURNIA LAKES DRIVE	<input checked="" type="checkbox"/> Add
		BOCA RATON, FL 33498	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

16 JAN 22 PM 2:03
OFFICE OF THE
CLERK OF THE
SUPREME COURT
FLORIDA

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

NOT FOR RELEASE

16 JAN 22 PM12:08
DEPT OF STATE, FLORIDA

E. Effective date, if other than the date of filing: 01/01/2016 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated JANUARY 1, 2016

Shawn Koch

Signature of a member or authorized representative of a member

STUART ROSENBLUM

Typed or printed name of signee