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(Re	equestor's Name)	.
(Ad	ldress)	
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T. HAMPTON

COVER LETTER

TO: Registration Sec Division of Corp		·	
SUBJECT:	uxury Listin Name of Lim	35 Unlimited , ted Liability Company	Realty, LLC
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Ju	liana Monj Name of Person	araz_
		Firm/Company	
	2701	Boen Ration Blu Address	d #106
	Boca	Rator Florid City/State and Zio Code CL/awcenter to be used for future annual report notifi	da 33431
	E-nyail address: (1	OLlawcenter, to be used for future annual report notif	Cow ication)
For further information co	oncerning this matter, please ca		
j	uliana Monjar	62 at (561) 869 Area Code Daytime	- 7 <i>703</i>
Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a check for th	e 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 Listings Unlimited Realty, LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Lia	bility Company)	,				
The Articles of Organization for this Limited Liability Company w Florida document number	ere filed on	1/7/15	an	d assig	ned	
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited liabili	ty company here	:				
The new name must be distinguishable and end with the words "Limited Liabili"	ty Company." the de	signation "LLC" or the	abbreviat	ion "L.L		
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A	<u> </u>				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A		SECRETAR) OF	15 FEB -4 AH	Section 1	-
B. If amending the registered agent and/or registered office address here:	ce address on o	our records, enter	FI ORES	 amerof	the r	<u>iew</u>
Name of New Registered Agent: New Registered Office Address:	Futar Florid	a street address				
	City	, Florida	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

	the Managers or Authorized Member Member being added or removed fron	on our records, <u>enter the title, name, and a</u> nour records:	ddress of each Manager
MGR = Ma AMBR = Au	anager uthorized Member		
<u> </u>	<u>Name</u>	<u>Address</u>	Type of Action
GR MBR	Jay Carrier	2701 Boca Raton B. Boca Raton, FL 30	Vd. 106
		Roca Raton, FL 3c	<u>393</u> □ Remove
			□ Remove
			□ Add
			ACC ST
			AGE COMME
			Remove T STATE STATE CORDA
			Add
			□ Remove
			□ Remove

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	the date of filing:(optional) cannot be prior to date of receipt or filed date and cannot be more than 90 days after the Florida Department of State)
the date this document is filed by the	he Florida Department of State)
Effective date, if other than The effective date must be specific, the date this document is filed by the Dated	he Florida Department of State)

Page 3 of 3

Filing Fee: \$25.00

