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SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: FIRST LUXURY Realty 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:
Bayyinah Sulianan
First Luxury Realty
3440 Hollywood Blvd. #413
Hollywood, FL. 33021 City/State and Zip Code
First Luxury realty a gmail. con E-mail address: to be used for future annual report notification)
For further information concerning this matter, please call:
Bayyinah Suli ango at (954) 999-7190 Area Code Daytime Telephone Number HET ARY Enclosed is a check for the following amount:
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy Fenclosed)

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

First Luxury Realty LLC
(Name of the Limited Hability Company as it now appears on our records.) (Afforda Limited Limity Company)
The Articles of Organization for this Limited Liability Company were filed on $01/21/15$ and assigned
Florida document number L 5000 2501.
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:
New Registered Office Address: Enter Florida street address
Florida AR L
City Print Code 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, parties 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>	Address	Type of Action
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(If an effective date is Note: If the date	f other than the date of listed, the date must be specificated in this block doc ive date on the Department	cific and cannot be es not meet the a	pplicable statutory	or more than 90 days	optional) after filing.) Pursuan , this date will not	t to 605.0207 (3 be listed as th
	ifies a delayed effec after the record is		t not an effecti	ve time, at 12:0	01 a.m. on the	earlier of:
Dated Jul	y 17	20	15			
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 	Signa	are or a memoer o	I OMON printed name of sign			

Page 3 of 3

Filing Fee: \$25.00