L1500003040S

(Requestor's Name)				
(Address)				
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COVER LETTER

Division of Corporations							
SUBJECT:	Aiami Luxe,	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:							
	I	ryna Muravia					
	_		Name of Person				
	Firm/Company						
•			Thibeoinputy				
	8	3473 Screna Creek ave					
	_		Address				
	Boynton Beach, FL 33473						
	City/State and Zip Code						
	iri	inavm78@gmail.com					
E-mail address: (to be used for future annual report notification)							
For further information concerning this matter, please call:							
Iryna Muravia				04-9978			
Name of Person A		at () Area Code	Daytime Tele	phone 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 er		☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		

MAILING ADDRESS:

Registration Section

TO:

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

FILED 2015 JUL 15 PM 12: 28 SECRETARY OF STATE TALLAHASSEE, FLORIDA

Miami Luxe, LLC		
(<u>Name of the Limited Liabi</u> (A Florid	ility Company as it now appears on our records.) da Limited Liability Company)	
The Articles of Organization for this Limited Liability Florida document number L15000030405	Company were filed on February 12,2015	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	mited liability company here:	
he new name must be distinguishable and contain the words "Li	imited Liability Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	 	
Principal office address MUST BE A STREET ADD	DRESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or regregistered agent and/or the new registered office ad		enter the name of the r
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flori	da
	City	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>	Address	Type of Action
MGRM	Vadym Muravia	8473 Serena Creek Ave	Add
		Boynton Beach, FL 33473	□ Remove
			Add
			□ Remove
			☐ Change
•		•	
			□ Remove
			☐ Change
			Add
			☐ Remove
			☐ Change
			□ Remove
			☐ Change
	···		Add
			□ Remove
			□ Change

.	tion, enter change(s) here: (Attach additional shanber should be Vadym Muravia for Miami Luxe, LLC	
-		
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		FIG. 12.
		28
Note: If the date inserted in this bl	date of filing: to be specific and cannot be prior to date of filing or more than ock does not meet the applicable statutory filing requirepartment of State's records.	rements, this date will not be listed as the
If the record specifies a delayed (b) The 90th day after the rec	l effective date, but not an effective time, a ord is filed.	at 12:01 a.m. on the earlier of:
Dated July 13		
	Signature of a member or authorized representative of a me	mber
Iryna Muravia	\bigcup	
 	Typed or printed name of signee	

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Filing Fee: \$25.00