11700036658

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(Cit	y/State/Zip/Phone	e #)
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K. SALY DEC 15 2017

COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: HIA	HI LUXURY	ASSETS LLC	
SUBJECT:	Name of Lim	ited Liability Company	
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:	
	JUAU	CARLOS MACH	O PENA
	MIARI LI	DXURY ASSET	SLLC
	1339 WE	ST 49 TH PLA	CE APTO.119
	HIALEAH	P MIAHI, FLOT	EIDA, US 32012 eail-corre
		1974 @ 60 dee	
For further information co	oncerning this matter, please ca	ill:	
TOAW CAR	Person	Area Code Daytime	9968 Telephone Number
Enclosed is a check for the	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)

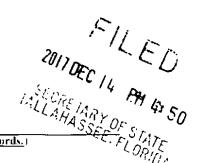
MAILING ADDRESS:

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



MIAHI LUXURY ASSETS LLC

A. If amending name, enter the new name of the limited liability company here:

(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 FEBRUARY 14,2017 and assigned Florida document number 41700036658

This amendment is submitted to amend the following:

The new name must be distinguishable and contain the words "Limited Li	ability Company," the designa	ation "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 registered agent and/or the new registered office address h		records, enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida st	reet address	
	Florida		
	City	Zin 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 Title Type of Action Name <u>Address</u> MARIA TERESA FERNANGE ULE FERRER C/ PERE IV, DUR 6 BJ. BARGON Add MGR Remove ☐ Change ROADIGO DANIG ROCOMORGNO CIPEREIU, DUM 6 BJ.BAIRCELONA DAdd MGQ DON THERE I A PROGRAMMENT ASSESS TO SERVE TO A PROGRAMMENT AND A BENEFIT ☐ Change AMBR RODELGO DODIEL ROCO NOTENO C(PERE ID, NOME DATO, BORTEWAND Add _____ Change JUAN CARLOS HACHO PENA 1339 WEST 45 TH PLACE APTO INDIAND Add HIAHE, FLOREA 33012 AMBR ☐ Remove ☐ Change

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ote: If the date inserted i	han the date of filing: date must be specific and cannot be in this block does not meet the	applicable statutory t	(op or more than 90 days aft iling requirements, th	tional) ter filing.) Pursuant to 605.02 his date will not be listed a
sument's effective date (on the Department of State's re	ecords,		
record specifies a c he 90th day after t	delayed effective date, b the record is filed.	ut not an effectiv	ve time, at 12:01	a.m. on the earlier
ed DECEMBE	<u>≥02 9 . 20</u>	F10	\bigcirc	
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Page 3 of 3

Filing Fee: \$25.00