1190000 84214

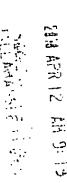
(Rec	questor's Name)	
(Add	iress)	
(Add	dress)	
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	me)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	

Office Use Only



500327520605

U4/12/19--U1019--U03 **25.00



Re's Linkling

COVER LETTER

TO: Registration Se Division of Cor	porations		
SUBJECT:a	rribeas Luxur Name of Lim	Real Estate Med Liability Company	Development, LLC
	Amendment and fee(s) are sub		
Please return all correspo	ondence concerning this matter	to the following:	
	Jamie A	1. Sason, Esy Name of Person	23 12 TA
	The Ticky	Firm/Company	
	270 Sh	Nortura Duc	
	Deeful	1 Och, FC	3344/
	Tsusson (City/State and Zip Code City/State and Zip Code Code	Omication)
For further information c	oncerning this matter, please ca		
Jamic S	P45567 f Person	at (56/)	Telephone Number
Enclosed is a check for th	ne following amount:		
\$25.00 Filing Fee	S30.00 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

Carribean Lu	XUIJ Real Estate Ocuelopemat
(<u>Name of the Limited Liabil</u> (A Florid	a Limited Liability Company)
The Articles of Organization for this Limited Liability	Company were filed on 3-26-19 and assigned
Florida document number <u>L190000</u> 8	4214
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lim	nited liability company here:
The new party must be distinguished.	nited Liability Company," the designation "LLC" or the abbreviation "LEC."
	nited Liability Company. the designation "LLC" or the abbreviation "Lac".
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDI	RESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered agent and/or the new registered office add	stered office address on our records, enter the name of the new lress here:
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	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

Title Type of Action MGR Sean Sullivan 1191 Barnan Road VAdd Boca Rator, FL 33432 Remove Change Hzpatrick Robert Fitzpatack ☐ Remove ☐ Change □ Remove ☐ Change □ Add ☐ Remove ☐ Change

). If amendii	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)
= <u></u>	Tuny - Sean Sullivan
Z	less remove as MBR. Phillip Non J bubut Fitzputrich
5	o only one officer - Seen Sullivan,
	5
_	
(If an effective <u>Note:</u> If the	ate, if other than the date of filing: 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) e date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the effective date on the Department of State's records.
the record The 90th Dated	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: h day after the record is filed.
-	Signature of a member or authorized representative of a member Signature of a member or authorized representative of a member Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00