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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: 3/aq Luxury Collection 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:

Chesice Williams
Name of Person
Blag Luxury Collection HC
J Firm/Company
2164 Platnum Boad, Suite D
Address
Apopka, Florida, 324 32703 City/State and Zip Code
City/State and Zip Code
blagluxury & gmail·com E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cherice Lyllams at (850) 238 6764.

Name of Person Area Code Daytime Telephone 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 enclosed)
- \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

20 July 27 PH 1.16

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327

Street Address: Registration S

Registration Section Division of Corporations The Centre of Tallahassee





Blag Luxury C	ollection LC						
(<u>Name of the Limited Liabili</u> (A Florida	ity Company as it now appears on our records.) a Limited Liability Company)						
e Articles of Organization for this Limited Liability Company were filed on 05/21/2019 and assigned orida document number							
This amendment is submitted to amend the following:							
A. If amending name, enter the new name of the lim	Organization for this Limited Liability Company were filed on						
The new name must be distinguishable and contain the words "Lim	nited 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 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 address here:	d office address on our records, <u>enter the name of the new registered</u>						
Name of New Registered Agent:							
New Registered Office Address:							
	Enter Florida street address						
	, Florida						
	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 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
MGR	Tony Williams	Suite D, Apopka, Florida, 327	23 ⊈Add
			🗆 Remove
			□Change
			□Add
			□Remove
			□Change
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ective date, if	other than the dat listed, the date must be	e of filing:	E. a.d. a.a. alan ara		(optional)	
e: If the date i	inserted in this block	does not meet the	applicable statute	ong or more man sorv filing require	o days after filing.) Pi ments, this date wi	ursuant to 605.0 Il not be lister

Charice Killiams

record is filed.

Dated January 23.7020.

1.1. Milliams