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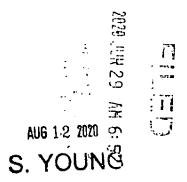


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COVER LETTER

Registration Section Division of Corporations

TO:

Super Luxu	ry Group, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Daniel Tzinker		
		Name of Person	
	Super Luxury Group, LLC		
		Firm/Company	
	1000 5th Street #200		
		Address	
	Miami Beach, FL 33139		
		City/State and Zip Code	
	danieltzinker@gmail.com		
	E-mail address: (to be used for future annual report noti	fication)
For further information c	oncerning this matter, please of	all:	
Daniel Tzinker		786 234-9898 at ()	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	ne 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 S Division of C P.O. Box 632	Section orporations	Street Address: Registration Se Division of Cor The Centre of T	porations
Tallahassee, l	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Super Luxury Group, LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited L	ny as it now appears ол our records. liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L19000236745</u> .	were filed on 09/19/2019	and assigned
This amendment is submitted to amend the following:		至 (7)
A. If amending name, enter the new name of the limited liabi	ility company here:	52
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1000 5th Street #200	
(Principal office address MUST BE A STREET ADDRESS)	Miami Beach, FL 33139	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1000 5th Street #200 Miami Beach, FL 33139	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter t</u>	the name of the new registere
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	:
	Flo	orida
	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>	<u>Address</u>	Type of Action
MGR	Alvaro Nunez Alfaro	155 Ocean Lane Dr. #605	
		Key Biscayne, FL 33149	□Remove
			
			🗖 Add
			□ Remove
			Change
			□Add
		 	Remove
			□Change
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			Change

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ote: If the date is	delayed effectiv	e date, but not :	an effective tim	ie, at 12:01 a.m	on the earlier	of: (b) The 90	th day after the
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