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COVER LETTER

TO: Registrati Division o	on Section f Corporations	a .	
SUBJECT:	LUXURY	CHIC LLC	
SUBJECT	Name of Limi	ted Liability Company	
The enclosed Articl	es of Amendment and fee(s) are sub-	mitted for filing.	
Please return all cor	respondence concerning this matter	to the following:	
	M	ARCELO DOMINICCI	
		Name of Person	
		Firm/Company	<u>-</u>
	7660 C	OMROW STREER. APT 202	
		Address	
	KI	SSIMMEE, FL 34747	
	EDNA.CONSULTANTS@	City/State and Zip Code GMAIL.COM	
	E-mail address: (t	o be used for future annual report notif	ication)
For further information	tion concerning this matter, please ca	all:	
MARCELO DOM	INICCI	at (347) 257	- 4687
N	ame of Person		: Telephone Number
Enclosed is a check	for the following amount:		
■ \$25.00 Filing F	ce ☐ \$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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LUXURY C	HIC LLC	
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L20000269518	were filed on 8/31/2020	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:	7650 Comrow Street. Unit 203	
(Principal office address MUST BE A STREET ADDRESS)	Kissimmee, FL 34747	2020
Enter new mailing address, if applicable:	7650 Comrow Street. Unit 203	720 P
(Mailing address MAY BE A POST OFFICE BOX)	Kissimmee, FL 34747	T 12
		. 05
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, <u>enter the n</u>	ame of the new regis
New Registered Office Address:		
	Enter Florida street address	
	, Florida	Zip Code
	City	zip Coae

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 addeor removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	JULIO CESAR VERGARA	7660 COMROW STREET. APT 202	□ Add
		KISSIMMEE, FL 34747	Remove
			Change
MGR	MARIA PAZ RUBBINI	7660 COMROW STREET. APT 202	
•		KISSIMMEE, FL 34747	≣Remove
			2020 Bhange Y 201
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`an effect <u>Vote:</u> If	e date, if other than tive date is listed, the date the date inserted in thint's effective date on th	must be specific an is block does not	nd cannot be price the appli	or to date of filing cable statutory	or more than 90 days		
record s I is filed	specifies a delayed effe L	ctive date, but no	ot an effective	time, at 12:01 a	i.m. on the earlier o	of: (b) The 90th	day after the
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				,			
		Signature of a	i member or aut	horized represent	ative of a member		