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COVER LETTER

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CHD ITAT.	ECHELON LUXURY PROPERTIES. LLC Name of Limited Liability Company							
SUBJECT								
The enclosed	Articles of .	Amendment and fee(s) are sub	mitted for filing.					
		ndence concerning this matter	-					
		Craig R. Lerman						
		•	Name of Person					
		Lerman Law Associates, F	OC.					
			Firm/Company					
		125 Townpark Drive Suite	: 300					
			Address					
		Kennesaw, Georgia 30144						
			City/State and Zip Code	 				
		sam@eluxurypropertiesllc.e						
For further in	iformation co	l:-mail address: (oncerning this matter, please c	to be used for future annual report no all-	otification)				
Craig Lerma		one control of the co	770 420-8448					
Craig Letina			at ()					
	Name of	f Person	Area Code Dayti	me Telephone Number				
Enclosed is a	check for th	e following amount:						
■ \$25.00 F	iling 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 radditional copy is enclosed)				
	<u>ling Address</u> gistration S		Street Address: Registration S	ection				
Div	rision of C	orporations	Division of Co	orporations				
), Box 632 lahassee, F		The Centre of	Tallahassee oe Street, Suite 810				
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Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Echelon Luxury Properties, LLC (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 12/7/2020 Florida document number $\frac{1.20000380926}{}$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: E Luxury Properties, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

The second of

<u>Title</u>	<u>Name</u>	Address	Type of Action
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