



(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer:	

Office Use Only



900436457219

05.1 24--.1.22--61, \*\*25...

2024 SEP 13 PH 2: 4

## **COVER LETTER**

3

Tallahassee, FL 32314

TO: Registration So Division of Cor			
SUBJECT: LUX	EBODYCO, LLC	,	
wommer. <u>Lev n</u>	Name of Lim	ited Liability Company	
The analogod Articles of	Amendment and fee(s) are sub	mitted for filing	
	ondence concerning this matter	-	
	Jonta Lei	MOV) Name of Person	
	The Glea	UX Haus Firm/Company	
	1000 Lake of	the woods bl	<u>vd. Apt. B</u> 203 I <del>V L. FC. 32730</del>
	Fern Park,	FL 32130 City/State and Zip Code	
		aus@9mail.co	ification)
For further information c	concerning this matter, please ca	all:	1
Jonta Name o	Lemon of Person	at ( <u>1089</u> ) <u>248</u> - Area Code Daytin	3932 ne Telephone Number
Enclosed is a check for the	ne following amount:		
S25.00 Filing Fee     S25.00 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 9	Section	<u>Street Address:</u> Registration Se	
Division of C P.O. Box 632	•	Division of Cor The Centre of T	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LUXERODYCD.ICC

(Name of the Limited Liability Compa (A Florida Limited l	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number $\underline{L21000145184}$ .	were filed on $03 29 2021$ 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 Gleaux Haus, Lu The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)	1000 Lake of the Woods Blud Fern Park. FL NPT. B203 32730
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1000 Lake of the Woods Blud & Fern Park, FL 32730
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Florida 75 F
<del></del>	City in Zip Code
New Registered Agent's Signature, if changing Registered Agent:	

I hereby accent the appointment as registered agent and agr

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
			□Add
			□Remove
		□Add	
		□Remove	
		□Change	
		□Add	
			□Remove
		☐ Change	
		□Remove	
		□Change	
		□ Add	
		□Remove	
		□Change	
	<del></del>	□Remove	
			□Change

(If an e <u>Note</u>	tive date, if other than the date of filing:
	The second care is the partition of that the contain
the rece	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the filed.
Dated	September um 2024.
	Signature of a member or authorized representative of a member
	Jonta Lemon

Typed or printed name of signee