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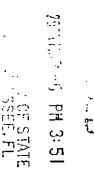
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## **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT:	LUXURY TRAI	NSPORT LLC	
	Name of L	Jimited Liability Company	_
The enclosed Artic	eles of Amendment and fee(s) are s	submitted for filing	
Picase return an co	orrespondence concerning this matt	ter to the following:	
	SAMI	SARY FATHELBAB Name of Person	
	Lux	URY SENAN LLC Firm/Company	
	10(00	SUMMER AZURE  Address  RUIEW, FL 33578  City/State and Zip Code  UFathelbab @ gmailer ( sylo be used for future annual report notification)  c call:  at 347  Approach Double Taleban No.	DR 39
	RIVE	RVIEW, FL 33578	- E - E
	0 -	City/State and Zip Code	- TX の - S の - S ::
	South F-mail address	utathelbab & gmailer (	
For further informa	ation concerning this matter, please	e call:	3: 51 STATE
Samy Sa	ARY FATHELBAB Name of Person	at (347) 922 - 863 Area Code Daytime Telephone No	) (
Enclosed is a check	k for the following amount:		
□ \$25.00 Filing I	Fee \$\frac{1}{2}\$\$30.00 Filing Fee & Certificate of Status	Certified Copy Cert (additional copy is enclosed) Cert	00 Filing Fee. tificate of Status & tified Copy itional copy is enclosed)
Division P.O. Box	tion Section of Corporations x 6327	Street Address: Registration Section Division of Corporations The Centre of Tallanassee	
Tallahas	see, FL 32314	2415 N. Monroe Street, Sui	ite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LUXURY TRAI	rport LLC
Ame of the Limited Habitity Compan (A Florida Limited Li	was it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company vibration document number	vere filed on $\frac{2/23/2002}{}$ and assigned
A. If amending name, enter the new name of the limited liabile  LUXURY SEDAN L  The new name must be distinguishable and contain the words "Limited Liability"	LC
Enter new principal offices address, if applicable:  Principal office address MUST BE A STREET ADDRESS)	10605 SUMMER AZURE DE RIVERVIEW, FL 33578
Enter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)	2000 - 10
3. If amending the registered agent and/or registered office acagent and/or the new registered office address here:	Idress on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	*, m

## 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
MbR	Sarry Samy Fothers	10605 Summer AZURE DR	- Add
	ð	10605 Summer AZURE DR Riverview, Pl 33578	= Remove
			□Change
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ctive date. if other than the date of filing:	(optional)
effective date is listed, the date must be specific and cannot be prior to date of fili  1 the date inserted in this block does not meet the applicable statuto	ing or more than 90 days after filing.) Pursuant to 605.0
iment's effective date on the Department of State's records.	
cord specifies a delayed effective date, but not an effective time, at 12:0	il a m. on the cordina of: (b). The With day offers
filed.	a.u. on the carret of, (b) The some day after
2/26/2024	
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