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(Re	questor's Name)	
(Add	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu:	siness Entity Nar	me)
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

TO: Registration Section

, Divi	sion of Corp	oorations		
SUBJECT:	THE HOUS	TING LUXURY & REAL ES	STATE LLC	
		Name of Lim	ited Liability Company	
The enclosed	Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspor	ndence concerning this matter	to the following:	
		JOSE CARLOS RODRIG	UEZ VILAS	
			Name of Person	
		THE HOUSTING LUXUE	RY & REAL ESTATE LLC	
			Firm/Company	
		16151 EMERALD COVE	RD	
			Address	
		WESTON, FL 33331		
			City/State and Zip Code	
		RMORAA@MORAVELL.		
		E-mail address: (to be used for future annual report notif	fication)
For further in	formation co	ncerning this matter, please ca	all:	
JOSE CARL	OS RODRIC	GUEZ VILAS	786 877-5771	
	Name of	Person		e Telephone Number
Enclosed is a	check for the	e following amount:		
■ \$25.00 Fi	iling Fee	☐ S30.00 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)
Reg Div P.O	iing Address istration Solision of Co Box 6327 ahassee, F	ection orporations 7	Street Address: Registration Second Division of Corporate Centre of T 2415 N. Monroo Tallahassee, FL.	porations allahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

and assigned				
and assigned				
he abbreviation "L.L.C."				
175 SW 7th Ave				
2822 SE				
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37.4 ARE				
name of the new regist				
3				

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.

City

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
MGR	RODRIGUEZ VILAS, JOSE C	175 SW 7th Ave	
		Miami FL 33130	□Remove
			= Change
			□Add
			□Remove
			□Change
	-		DAdd
			□Remove
			□Change
			□Add
			□Remove
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ective date, if other than the	date of filing:			(optional)		
effective date is listed, the date mus- e: If the date inserted in this blo	ock does not me	et the applicab	date of filing or r le statutory filir	nore than 90 days ng requirements	after filing.) Pu , this date wi	irsuant to Il not be	605.020 listed a
ument's effective date on the De	partment of Sta	te's records.					
cord specifies a delayed effective s filed.	date, but not ar	effective time	e, at 12:01 a.m.	on the earlier o	f: (b) The 9	0th day	after th
ed		2022					
		_/)n					
		THE					
	Signatura of a ma	mber of authoric	zed representative	of a member			_