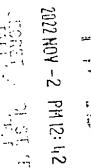
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PICK-UP	☐ WAIT	MAIL
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ALLAHASSEE, FLOS

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COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registration Sec Division of Corp	tion orations	•		
	ETY SALES AND RENTALS	LLC		
SUBJECT:	Name of Limit	ed Liability Company		
The enclosed Articles of A	Amendment and fee(s) are subn	nitted for filing.		
Please return all correspor	idence concerning this matter to	o the following:		
	CORRADO VACCARO			
		Name of Person		
	HIGH SOCIETY SALES A	AND RENTALS,LLC		
		Firm/Company		
	9795 NW 7TH AVE			
		Address		
	MIAMI,FL.33130			
		City/State and Zip Code		
	HIGHSOCIETYAUTOREN			
		o be used for future annual report not	neation)	
For further information co	oncerning this matter, please ca	ill:		
CORRADO VACCARO		860 982-5917 at ()		
Name of	f Person	Area Code Daytin	ne Telephone Number	
Enclosed is a check for the	ne following amount:			
■ \$25.00 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 Addres		Street Address:	ontion	
Registration Section Division of Corporations			Registration Section Division of Corporations	
P.O. Box 6327			The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HIGH SOCIETY SALES AND RENTALS,L.			
(Name of the Limited Liability (A Florida	Company as it now appea Limited Liability Company)	irs on our records.)	
The Articles of Organization for this Limited Liability Co.	ompany were filed on 5	/5/2022	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ted liability company l	iere:	
N/A			
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the	designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1353 NW 79T	H ST	
Principal office address MUST BE A STREET ADDR	ESS) MIAMI, FL. 3	3147	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SAME	·	
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	l office address on our	records, <u>enter the</u>	name of the new regi
Name of New Registered Agent: N/A			
Name of New Registered Agent:	SAME OX) gistered office address on our records, enter the name of here:		
Name of New Registered Agent:			
Name of New Registered Agent:		orida street address , Florid	a 33018

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
_member	The Estate of Gregory J Chomko	1640 orchard rd Berlin, CT	□Add
		06037	☐Remove
			□Change
		<u> </u>	□Remove
			☐Change
			□Add
			□Remove
			Change
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ective date, if other than the da	te of filing:		(optional)	
n effective date is listed, the date must be te: If the date inserted in this block	specific and cannot be prior does not meet the applic	to date of filing or more the able statutory filing requ	in 90 days after filing.) Pursuan iirements, this date will not	t to 605.020 be listed a
cument's effective date on the Depa	irtment of State's records.	2010 2121111111 211111	•	
ecord specifies a delayed effective d	ate, but not an effective ti	me, at 12:01 a.m. on the	earlier of: (b) The 90th de	ay after the
is filed.				
OCTOBER 4	2022			
, 00.00	:	·		
				
Corrado Vaco				

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Filing Fee: \$25.00