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(Re	questor's Name)	
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PICK-UP	MAIT	MAiL.
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	
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Office Use Only



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2022 JUN 27 AM 10: 29

2022 JUH 27 AH 10: 41

of 10/27/2022

COVER LETTER

SUBJECT:	F T Lu	xury Group	110
	Name of Limited	Liability Company	
The enclosed Articles of	Amendment and fee(s) are submit	ted for filing.	
Please return all correspo	ndence concerning this matter to	the following:	
	Christopher	Name of Person	7
		Firm/Company	
	Po Box	2184 Address	<u>.</u>
	land olake	3 FC 34 City/State and Zip Code	1639
	E mail addrage: Ho	be used for future annual report notific	ation)
E. Garley information a	oncerning this matter, please call.		unony
roi iuither intormation c	oncerning this thatter, prease can		12-5/
Name o	f Person	at (727_) 452 - Area Code Daytime	Telephone Number
Enclosed is a check for the	he following amount:		/
☐ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

TO:

Registration Section Division of Corporations

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

U	Г	2022 JUN 27 AH 10: 41
C & T Luxury	Grave	CC St.L. SALE AND ANTE
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears	on our records.) DALL ASSECTED
`	•	x /01/22
The Articles of Organization for this Limited Liability Company	were filed on(06 / 06 / 1012 and assigned
Florida document number <u>L 22 COO 256 9</u> 83)	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company her	<u>e</u> :
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the des	ignation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2165	1 Amelia Rose way
(Principal office address MUST BE A STREET ADDRESS)	Land) Lakes FL 34637
·		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		
B. If amending the registered agent and/or registered office:	addrace on our re	cords, enter the name of the new registered
agent and/or the new registered office address here:	address on our re	colus, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	P . 171	La constitución
	Enter Flori	da street address
	City	, Florida Zip Code

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 Type of Action Address Title Name MGK TIFFing Perkins POBOX 2184 DAdd land Olakes FL 34139 Externove MGR Christopler M Murphy POBOX 2184 and O Lakes FC 34639 Remove _____ Change ____ Change □Change ______ □Remove □Remove

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an effective date is l ote: If the date is	other than the date listed, the date must be sp nscreed in this block d we date on the Depart	pecific and cann loes not meet t	ot be prior to da the applicable	te of filing or mor statutory filing	e than 90 days a	ptional) ifter filing.) Pursi this date will r	uant to 605.020 not be listed a
record specifies a lis filed.	delayed effective date	e, but not an e	ffective time,	nt 12:01 a.m. or	i the earlier of	(b) The 90tl	n day after the
ated F	6/27/		2022				
		11-		~_			
	Siun	ature of a memb	per or authorized	f representative of	f a member		

Filing Fee: \$25.00