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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LARSON ACCOUNTING AND CONSULTING SERVICES LLC

Account Number : I20160000067 Phone : (407)370-3686

Fax Number : (407)370-3120

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN INIFNITY SAS REAL LUXURY MANAGEMENT LLC

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JAN 1 0 2024

COVER LETTER

TO: Registration S Division of Co					
	SAS REAL LUXURY MANA	AGEMENT LLC			
SUBJECT:	Name of Lin	ited Liability Company			
The enclosed Articles of	'Amendment and fee(s) are sub	omitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
	CAROLINE LARSON				
		Name of Person			
	LARSON ACCOUNTING	ì			
		Firm/Company			
	7901 KINGSPOINTE PK	WY STE 17			
		Address		13 6	ງ ຄຸງ
	ORLANOD FL 32819				7
		City/State and Zip Code			o ง
	ASSISTANT.FLAVIANE	@LARSONACC.COM to be used for future annual report notifies	Hion)	~~.	
For further information	concerning this matter, please o	•		1 =	
FLAVIANE		407 370-3686		· · · · · · ·	2)
Name	of Person	Area Code Daytime T	etephone Number		
Enclosed is a check for i	he following amount:				
≒ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	\$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (e of Status &	
Mailing Addre Registration Division of O	Section	Street Address: Registration Secti Division of Corpo			
P.O. Box 63	The state of the s	The Centre of Tal	lahassee		

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

INIFNITY SAS REAL LUXURY MANAGEMENT LLC

(Name of the Limited Li (A I	<u>iability Compan</u> Iorida Limited Li	y as it now appea ability Company)	irs on our reco	<u>-ds.</u>)			
The Articles of Organization for this Limited Liabili	lity Company s	vere filed on 1	2/06/2022		and	assigne	>d
The Afficies of Organization for this chimica chaom	my Company v	vere med on _	-			u001EII	.0
Florida document number L22000512178	 ·				.,	2(
This amendment is submitted to amend the following	ng:				: 2 : 3 : 3	123 SE	11.7-e,
A. If amending name, enter the new name of the	e limited liabil	ity company h	<u>iere</u> :	, 	; ; ; ; ; ;	√. .p	
INFINITY SAS REAL LUXURY MANAGEMENT LI				7		~	ा ्रस्याम्
The new name must be distinguishable and contain the words	"Limited Liabili	y Company," the	designation "LI	C" or the abbis	viation	·主.C.	स्था स्थापना स स्थापना स्थापना स्थापन
Enter new principal offices address, if applicable	µ.•	N/A			7.7	=	NEW P
				:,,	-!	<u>යා</u>	
(Principal office address MUST BE A STREET A	DDRESS)			·	1.7		
							
Enter new mailing address, if applicable:		N/A					
(Mailing address MAY BE A POST OFFICE BO)	Y)						
Manual andress MAT BE A 1 031 011 ICE 102	<u> </u>						
		-	·	•••			
				th	of the		
B. If amending the registered agent and/or regis agent and/or the new registered office address he	stered office a	daress on our	records, ente	r ine name	or the	new ro	gistered
agent and/or the new registered office address no	ere.						
Name of New Registered Agent:	N/A	 	···				
N. D. Co. J. Office Address.							
New Registered Office Address:		Enter Flo	orida sircei addi	·ess			
		City	I	Florida	Zip C	la	
		Cuù.			zip C	we	
New Registered Agent's Signature, if changing Regis	istered Agent:						
I hereby accept the appointment as registered as provisions of all statutes relative to the proper a accept the obligations of my position as registere being filed to merely reflect a change in the region company has been notified in writing of this change.	ind complete j ed agent as p istered office (performance o rovided for in	of my duties, Chapter 603	and I am fai 5, F.S. Or, if	niliar This a	with a locume	nd

If Changing Registered Agent, Signature of New Registered Agent

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>	Name	Address	Type of Action
			□Add
			©Remove
			Change
			□Add
		-1	🗆 Remove
			Change
			🗆 Add
			□Remove
			□ Change
			DAdd
			Remove
			□Change
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Effective date, if other than the (If an effective date is listed, the date mus <u>Note:</u> If the date inserted in this ble document's effective date on the De	, he specific and cannot be pric ock does not meet the appli	(optional) r to date of filing or more than 90 days after filing.) Pursuant to 605 cable statutory filing requirements, this date will not be list	5.0207 () ted as th
the record specifies a delayed effective tord is filed.	date, but not an effective	ime, at 12:01 a.m. on the earlier of: (b) The 90th day after	er the
Dated September , 5	. 2023	·	
	as Ribamar P	Rei5	
	organizate of a member of the	serious representative of a membra	
ISAIAS RIBAMAR M I	REIS		

Filing Fee: \$25.00