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2023 JUN 28 At: 7: 2



COVER LETTER

Registration Section

Tallahassee, FL 32314

TO:

Div	ision of Cor	porations		
	LUXE REA	LTY GROUP OF FLORIDA I	.LC	
SUBJECT:		Name of Limi	ted Liability Company	
The enclosed	l Articles of .	Amendment and fee(s) are subt	nitted for filing.	
		ndence concerning this matter t		
	· · · · · · · · · · · · · · · · · · ·	·	•	
		Nayana Hernandez		
			Name of Person	
			Firm/Company	
7280 SW HIGHWAY 200			Tunicanpany	
			Address	
		OCALA, FL 34476		
		City/State and Zip Code		
		nayana.hernandez@millslux		
		E-mail address: (t	o be used for future annual report no	tification)
For further i	nformation c	oncerning this matter, please ca	ill:	
Nayana Her	nandez		352 441-9200 at ()	
	Name o	f Person	Area Code Daytii	me Telephone Number
Enclosed is:	a check for th	ne following amount:		
			☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	niling Addres		Street Address: Registration S	ection
		Corporations	Division of Co	orporations
P.0	D. Box 632	.7	The Centre of	Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

	-	7. JUN 28 AH 7.	· 2c
LUXE REALTY GROUP OF FLORIDA LLC (Name of the Limited Liability Com (A Florida Limite)			
The Articles of Organization for this Limited Liability Compared and the Compared Co			and assigned
his amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	ability company here:		
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the design	nation "LLC" or the ab	previation "L.L.C."
Enter new principal offices address, if applicable:		•	
Principal office address MUST BE A STREET ADDRESS)			
			-
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)			
3. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	e address on our recor	ds, <u>enter the nam</u>	e of the new registe
Name of New Registered Agent:			,
New Registered Office Address:	Enter Florida s	treet address	

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 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>	<u>Name</u>	Address	Type of Action
MGR	Deborah F Webb	7 Arboles Lane Port St. Lucie 34952	= Add
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an effective date is listed, the date r	must be specific and	d cannot be prior	to date of filing or	more than 90 days	after filing.) Pursua	int to 605,020
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is filed.						
June 22nd		2023				
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	Signature of a	member of a th	orizoa epresentat	ive of a member		;
Nayana Hernandez	Signature of a	member of with	orizos epresentat	ive of a member		i

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Filing Fee: \$25.00