## L23000308716

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## **COVER LETTER**

TO:	Registration Se Division of Cor					
SUBJEC	XD POOLS	S LUXURY LLC				
30031.0		Name of Lim	ited Liability Company	<del></del>		
		Amendment and fee(s) are sub	<u>-</u>			
		VICTORIA MORAES				
		***	Name of Person			
		ASSELFIS INTERNATIO	NAL LLC			
		· · - · · · · · · · · · · · · · · · · ·	Firm/Company		2023	
		7657 GOLF CHANNEL D	PR		130	
			Address		17	5
		ORLANDO, FL, 32819			2023 OCT 17 PM 12: 40	600
		INFO@ASSEL DIS COM	City/State and Zip Code	112	2:4(	Orana I fara
		INFO@ASSELFIS.COM  E-mail address: (	to be used for future annual report notificati		C	-3
For furth	er information co	oncerning this matter, please c	·	<i></i>		
VICTOR	IIA MORAES		786 8512585			
	Name of	Person	at () Area Code Daytime Tel	ephone Number		
Enclosed	is a check for th	e following amount:				
	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 Address Registration S		Street Address:			

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

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 OF

XD POOLS LUXURY LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on <sup>06/27/2023</sup> \_\_\_\_ and assigned Florida document number 123000308716 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: TNV ACTION FUND LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "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) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address \_, Florida \_\_\_

## 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 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
AMBR	EIGHT HOLDING GROUP LLC	7657 GOLF CHANNEL DR	□Add
		ORLANDO, FL, 32819	=Remove
			□Change
AMBR	27 ASSOCIATION LLC	7657 GOLF CHANNEL DR	□ Add
		ORLANDO, FL. 32819	
			□Change
AMBR	SEVEN LANDS HOLDING GROU	7657 GOLF CHANNEL DR	□Add
		ORLANDO, FL, 32819	■Remove
			□Change
AMBR	XD HOLDING LLC	7657 GOLF CHANNEL DR	
		ORLANDO, FL, 32819	□Remove
			□ Change
AMBR	TAKE ACTION FUND LLC	14400 SHOCKLACK DR	DIVISION  202€OCT
		WINTER GARDEN, FL. 34787	OF O
			PH GO Add
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Typed or printed name of signee