

L23000308716

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

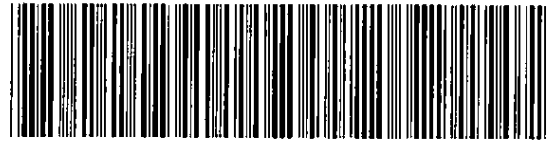
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2023 OCT 17 PM 12:40

RECEIVED  
R. HUNT  
10/17/23

## COVER LETTER

TO: **Registration Section  
Division of Corporations**

SUBJECT: XD POOLS LUXURY LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

VICTORIA MORAES

Name of Person

ASSELFIS INTERNATIONAL LLC

Firm/Company

7657 GOLF CHANNEL DR

Address

ORLANDO, FL, 32819

City/State and Zip Code

INFO@ASSELFIS.COM

E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

VICTORIA MORAES

at ( 786 ) 8512585

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|---|---|--|--|

**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

**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>	<u>Address</u>	<u>Type of Action</u>
AMBR	EIGHT HOLDING GROUP LLC	7657 GOLF CHANNEL DR	<input type="checkbox"/> Add
		ORLANDO, FL, 32819	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	27 ASSOCIATION LLC	7657 GOLF CHANNEL DR	<input type="checkbox"/> Add
		ORLANDO, FL, 32819	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	SEVEN LANDS HOLDING GROU	7657 GOLF CHANNEL DR	<input type="checkbox"/> Add
		ORLANDO, FL, 32819	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	XD HOLDING LLC	7657 GOLF CHANNEL DR	<input checked="" type="checkbox"/> Add
		ORLANDO, FL, 32819	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	TAKE ACTION FUND LLC	14400 SHOCKLACK DR	<input checked="" type="checkbox"/> Add
		WINTER GARDEN, FL, 34787	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2028 OCT 17 PM 2:40  
 DIVISION OF CORPORATIONS  
 TALLAHASSEE, FLORIDA

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

TO REMOVE THE ACTIVITIES OF POOL CONSTRUCTIONS AND SERVICES.

TO ADD THE ACTIVITY OF INVESTMENTS.

2023 OCT 17 PM 12:40

CLERK OF SUPERIOR COURT  
DIVISION OF CORPORATIONS

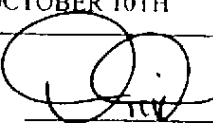
**E. Effective date, if other than the date of filing:** \_\_\_\_\_ **(optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated OCTOBER 10TH 2023



Signature of a member or authorized representative of a member

VICTORIA PRIETO MORAES - AUTHORIZED REPRESENTATIVE

Typed or printed name of signee

**Filing Fee: \$25.00**