L23000324068

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	e)
(Do	cument Number)	
Certifiec Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	

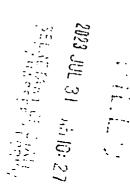
Office Use Only

A. RIVERS AUG 27 2023



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COVER LETTER

Registration Section Division of Corporations

TO:

Sarina Luxu SUBJECT:	ry Realty LLC		
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Sarina Nayebmohammadi		
		Name of Person	• .
	Sarina Luxury Realty LLC		
	<u></u>	Firm/Company	
	540 brickell key drive		
		Address	
	Miami, FL 33131		
	- -	City/State and Zip Code	•
	sarina.nayebmohammadi@g		
	E-mail address: (to be used for future annual report notif	ication)
For further information co	oncerning this matter, please co	all:	
Sarina Nayebmohammad	ii	305 8127127 at ()	·
Name o	f Person	Area Code Daytime	: Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 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 Addres Registration S Division of C P.O. Box 632 Tallahassee, 1	Section Corporations 27	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monroe	porations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

• • •	
y Company as it now appears on our records.) Limited Liability Company)	
ompany were filed on July 10th, 2023	and assigned
ted liability company here:	
ited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
ESS)	
	
	<u></u>
<u></u>	
<u> </u>	
l office address on our records, enter the na	me of the new regi
·	2023 SE
Free Florida and II	<u> </u>
•	第 章
City	-Zip Code
1	ted liability company here: ted Liability Company." the designation "LLC" or the ESS) office address on our records, enter the na 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 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 Autharized Person(s) authorized to manage, enter the title, name, and address of each person being add or removed from our records:

The state of the s

MGR = Manager AMBR = Authorized Member

<u> Fitle</u>	Name	Address	Type of Action
AMBR	Sarina Nayebmohammadi	540 Brickell key drive Miami FL 33131 AIYF 1809	\exists Add
			□Remove
			□Change
			\equiv Add
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Effective date, if other than the date in effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Dep	k does not meet the applicable sta	(option of filing or more than 90 days after tutory filing requirements, this	onal) filing.) Pursuant to 605.020 s date will not be listed a
e record specifies a delayed effective of	late, but not an effective time, at	2:01 a.m. on the earlier of: (b) The 90th day after the
d is filed.			
ra is filed.	2023		
rd is filed. 26th July Dated	2023 gnature of a member or authorized re		

and the second s

Filing Fee: \$25.00