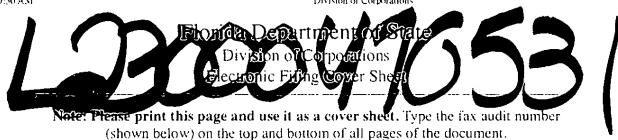
Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INCFILE.COM LLC Account Number : I20220000070 Phone : (888)462-3453 : (877)919-2613 Fax Number

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

Email Address: EFILE1234@INCFILE.COM

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN NJN LUXLISTINGS LLC

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Tallahassee, FL 32314

## **COVER LETTER**

TO: Registration Division of 0	n Section Corporations	
empreet.	NJN	LUXEISTINGS LLC
SUBJECT:	Name of	Limited Liability Company
The enclosed Articles	s of Amendment and fee(s) are	submitted for filing.
Please return all corre	espondence concerning this ma	tter to the following:
	LOVETTE DOBSON	
		Name of Person
		Firm/Company
	17350 STATE HWY 2	49 STE 220
	-	Address
	HOUSTON TX, 77064	į.
	EFILE1234@INCFILE	City/State and Zip Code .COM .ss; (to be used for luture annual report notification)
For further information	on concerning this matter, pleas	se catl:
LOVETTE DOBSON	N.	at ()
Nan	ne of Person	Area Code Daytime Telephone Number
Enclosed is a check for	or the following amount:	
■ \$25,00 Filing Fee	e S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & S60.00 Filing Fee,  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)
<u>Mailing Ado</u> Registratio		Street Address: Registration Section
	of Corporations	Division of Corporations
P.O. Box 6	6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

(((H23000362755 3)))

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NJN	LUXLISTINGS LLC		
( <u>Name of the Limited Liablli</u> (A Florida	ty Company as it now appears of Limited Liability Company)	n our records.)	<del></del>
The Articles of Organization for this Limited Liability C Florida document number	Company were filed on	10/12/2023	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	ited liability company here	<b>:</b> :	
LUXLISTINGS LLC			
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the desi	gnation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u>.</u>	
(Principal office address MUST BE A STREET ADDI	RESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
Franking dual control and the	<del></del>	<del></del>	
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	d office address on our rec	ords, enter the na	ime of the new registero
Name of New Registered Agent:			[S] -
New Registered Office Address:	Enter Florid	la sircet address	
		, Florida j	
<del></del>	City		Zip Gode
New Registered Agent's Signature, if changing Registere	ed Agent:		10
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and accept the obligations of my position as registered abeing filed to merely reflect a change in the register company has been notified in writing of this change	complete performance of n igent as provided for in Cl cd office address. I hereby	ry duties, and Fai rapter 605, F.S. C	n familiar with and Or, if this document is
	If Changing Registered Age	nt, 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: (((H23000362755 3)))

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			DAdd
		<del>.</del>	□Remove
			\BChange
			□Add
			□Remove
			□Remove
			□Add
			□Remove
			□Remove
			□Change
			□Add
			LIRemove
		<u> </u>	□Change
			□Add
			□Remove
			□Change

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ctive date, if other than the effective date is listed, the date must. If the date miserted in this blument's effective date on the Di	t be specific and cannot book does not meet the	applicable state			
ord specifies a delayed effectivifiled.	e date, but not an effec	ctive time, at 12	.01 a.m. on the ca	rifier of. (b) The	90th day after the
October 17th	. 2023				
	Nicholar	Michael	celles exentative of a men		
<del>-                                    </del>	Signature of a member of	or authorized repr	esentative of a men	ibei	