## L24000301077

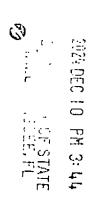
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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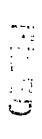
Office Use Only



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## **COVER LETTER**

TO: Registration Sec Division of Corp			
OLUB LE CE	Roughly	delina interiors	
SUBJECT:	Name of Limit	CRUXE INTERIORS  ted Liability Company	
The enclosed Articles of A	Amendment and fee(s) are subn	nitted for filing.	
Please return all correspon	idence concerning this matter t	o the following:	
	Umesh	Compos Ciomez	<u> </u>
	Roualt	y deluxe interior	<i>3</i> 7 <i>3</i>
	3654 Via	Poinciana, APT 20 Address	ა <u>უ</u>
		City/State and Zip Code	
	Y ON OLAN DELOTE E-mail address: (to	interiors @ 4mail. Co be used for future annual report noti	nication)
For further information co	ncerning this matter, please ca	II:	
<u>∪ M€3</u> Name of	h Cumps (icmez Person	2 at (56) 243 - 6 Area Code Daytim	e Telephone Number
Enclosed is a check for the	: following amount:		
☑ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations allahassee e Street. Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Koyalty	Deluxe Interiors
( <u>Name of the Limited Liability C</u> (A Florida Lii	ompany as it now appears on our records.) mited Liability Company)
The Articles of Organization for this Limited Liability Com Florida document number <u>L2400301077</u> .	pany were filed on 07/04/24 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	
N <sub>1</sub>	
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:	N/A
(Principal office address MUST BE A STREET ADDRES	<u></u>
Enter new mailing address, if applicable:	N/A
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:	ffice address on our records, enter the name of the new registered
	Enter Florida street address
	, Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered A	gent:
provisions of all statutes relative to the proper and compacted the obligations of my position as registered agen being filed to merely reflect a change in the registered ocompany has been notified in writing of this change.	E S S S S S S S S S S S S S S S S S S S
11	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>	Name	Address	Type of Action
AMBR	Umesh Campos Games	3654 Via poinciona, aft 205	_ □Add
		Lane Worth, Florida, 33467	_ □Remove
			_ Change
MGR	Manuela Mejia Cifuentes	3654 Via poinciana, apt 205	<u>&gt;</u> □Add
	Citociticas	Love worth, Florida, 33467	_ 🗆 Remove
			_ 🗹 Change
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Effective date, if other the state of the state of the state is listed, the state inserted in document's effective date of the state of	date must be specific a in this block does no	ot meet the applica	2 2024 o date of filing or mobble statutory filing	the street to make after 11:	ling.) Pursuant to 60	05.0207 (3 sted as th
e record specifies a delayed rd is filed.	l effective date, but r	not an effective tir	me, at 12:01 a.m. o	on the earlier of: (b)	The 90th day aft	ter the
5					1924	90 a;
Dated <u>Decembe</u>	er 12th	- 1 2024	_·		WANTE TO	7
		1 1			= = =	
	1 / <i>N</i> /1	AF >			, , ,	•
	Signature of	la member or author	rized representative (	of a member	PH 3: 44 CREE, FL	•