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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

I. Na	ame of the limited liability company: LUXURY FINA	NCE, LLC			
2. (6)	Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 7750 WISCONSIN AVENUE		
	7750 WISCONSIN AVENUE				
	Bethesda, MD 20814		Bethesda, MD 20814		
	12/04/2001	1	мо1000002700		
3.	Date of filing/registration in Florida	4.	Docun	nent number	
5. (a)	Registered Agent and Registered Office shown on the records of	f the Florida I	Dept. of State:		
	C T CORPORATION SYSTEM				
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)		202 .SE(
	1200 SOUTH PINE ISLAND ROAD			28 4 NC	
	PLANTATION F	33324 L_		I IL SECRETARY AII AIIAS SE	
		<u> </u>		PH PH	
(b)	Enter name of NEW Registered Agent and/or NEW Registere			STA:	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	d Office addi	ress:	24:	
	Corporation Service Company			10	
	NEW Registered Office Address:				
	1201 Hays Street				
	Tallahassee	32301			
change agent v was/we	imited liability company is not organized under the late or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lighter authorized by an affirmative vote of the members icles of organization or the operating agreement of the	e registered iability con of the limit	office and the bi pany, it is hereb ed liability comp	usiness office of the registered y confirmed that the change(s)	
	/s/ Andrew P.C. Wright			Authorized Person	
Signa	ture of a member or authorized representative of a member	-	Printed	for typed name of signee	
provisi the obl to mer	by accept the appointment as registered agent and ag ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. I I in writing of this change.	: performar ed for in Ch hereby con	ive of my duties, papter 605, F.S. plant that the limit	and I am familiar with and accept Or, if this document is being filed ited liability company has been	
<u>X</u>	Ince Cokuble GRACE E. KIRB	Y, ASST. V	VICE PRESIDEN	NT .	
Signatu	re of Registered Agent				

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