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(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	e #)
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COVER LETTER

TO: Amendment Section
Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: LUXURY CONSULTING G	ROUP, INC.
DOCUMENT NUMBER: P01000021328	
The enclosed Articles of Amendment and fee are submitted	ted for filing.
Please return all correspondence concerning this matter to t	the following:
STEVEN H. KOZAK	
Na	ame of Contact Person
LUXURY CONSULTING GROUP, INC.	
	Firm/ Company
6100 HOLLYWOOD BLVD., SUITE 515	
	Address
HOLLYWOOD, FL 33024	
Cit	ty/ State and Zip Code
highlines@live.com	
E-mail address: (to be	e used for future annual report notification)
For further information concerning this matter, please call,	
STEVEN H. KOZAK	at (305) 298-5880
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable	e to the Florida Department of State:
X \$35 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)
Mailing Address Amendment Section	Street Address Amendment Section
Division of Corporations	Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

LUXURY CONSULTING GROUP, INC.		
(Name of Corpora	tion as currently filed wi	th the Florida Dept. of State)
P01000021328		
(Doc	tument Number of Corpora	ation (if known))
Pursuant to the provisions of section 607,10 amendment(s) to its Articles of Incorporation		Florida Profit Corporation adopts the following
A. If amending name, enter the new name	ne of the corporation:	
		The new
name must be distinguishable and contain to "Corp.," "Inc.," or Co.," or the designation "Covord "chartered," "professional association,"	Corp," "Inc," or "Co". A pr	mpany," or "incorporated" or the abbreviation ofessional corporation name must contain the
B. Enter new principal office address, if	applicable:	6100 HOLLYWOOD BLVD.
(Principal office address <u>MUST BE A ST</u>	REET ADDRESS)	SUITE 515
		HOLLYWOOD, FL 33024
C. Enter new mailing address, if applica (Mailing address MAY BE A POST O		6100 HOLLYWOOD BLVD.
		SUITE 515
		HOLLYWOOD, FL 33024
D. If amending the registered agent and new registered agent and/or the new		
Name of New Registered Agent:		
	6100 HOLLYWOOD BL	VD SUITE 515
		da street address)
New Registered Office Address:	HOLLYWOOD (C	. Florida 33024 City) (Zip Code)
New Registered Agent's Signature, if cha I hereby accept the appointment as register		h and accept the obligations of the position

LUXURY CONSULTING GROUP, INC.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held, President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones. V as Remove, and Sally Smith, SV as an Add.

Example	e:				
X	Change	<u>PT</u>	John D	oe .	
X	Remove	<u>V</u>	Mike Jo	ones	
x	Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of (Check		<u>Title</u>	1	<u>Name</u>	Address
1) <u>X</u>	Change	DPR		STEVEN H. KOZAK	6100 HOLLYWOOD BLVD
	Add				SUITE 515
	Remove				HOLLYWOOD, FL 33024
2)	Change				
	Add				
_	Remove				
3)	Change				
-/	Add		- -		
	Remove				
4)	Change				
	Add				
	Remove				
5)	Change		<u> </u>		
	Add				
	Remove				
6)	Change		_ -		
	Add				
	Remove				

LUXURY CONSULTING GROUP, INC.	AT
If amending or adding additional Articles, enter change(s) here	:
(Attach additional sheets, if necessary). (Be specific)	
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If an amendment provides for an exchange, reclassification, or provisions for implementing the amendment if not contained in	the amendment itself:
(if not applicable, indicate N/A)	t the amendment itsen.
(II not applicable, indicate tv/A)	
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LUXURY CONSULTING GROUP, INC.	AT
The date of each amendment(s) adoption:	, if
other than the date this document was signed.	
Effective date if applicable:	<u>.</u>
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be li as the document's effective date on the Department of State's records.	sted
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
Signature	
. (By a director, president or other officer – if directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
appointed indiciary by that induciary,	
STEVEN H. KOZAK	
(Typed or printed name of person signing)	
DIRECTOR	
(Title of person signing)	

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