Division of Corporations **Electronic Filing Cover Sheet**

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(((H18000240209 3)))



H180002402093ABC-

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : THE SCHIFFMAN LAW GROUP, P.A.

Account Number : I20000000100

Phone Fax Number

: (305)682-1328 : (305)682-0063

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

Email	Address:	<u> </u>

COR AMND/RESTATE/CORRECT OR O/D RESIGN SOUTH FLORIDA LUXURY HOMES, INC

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AUG 2 1 2018

I ALBRITTON

Electronic Filing Menu

Corporate Filing Menu

Help

To: 18506176380 From: 13056820063 Date: 08/20/18 Time: 8:55 AM Page: 04/08

COVER LETTER

TO: Amendment Section

Division of Corpo	rations	•		
NAME OF CORPOR	ATION: South Floir	da Luxury Ho	mes, I	nc
TAME OF CORPOR	P18000024868			
DOCUMENT NUMB	ER:			
The enclosed Articles of	of Amendmens and fee are su	abmitted for filing.		
Please return all corresp	pondence concerning this me	itter to the following	; :	
,	Adam R. Schiffman, Esqu	ire		
-		Name of Contac	t Person	
•	The Schiffman Law Group	, P.A.		
-		Firm/ Comp	any	· · · · · · · · · · · · · · · · · · ·
:	2875 N.E. 191 Street, Suit	e 500		
Address				
Aventura, FL 33180				
-		City/ State and 2	ip Code	
adami	@realatty.net			
	E-mail address: (to be us	sed for future annual	report no	otification)
	1. man access, (10 00 to		i report at	, and a double and
For further information	concerning this matter, pleas	se call:		
Adam R. Schiffman, Esquire		at (305		682-1328
Name of	Contact Person	A	rea Code	& Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Floric	la Depart	ment of State;
Ξ _₹ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing F Certified Copy (Additional copy enclosed)		☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Malling Address			Street Ad	
Amen			ent Section	
Divisi P.O. E	Division of Corporations Clifton Building			
Tallah			cutive Center Circle	
	Taliahassee, FL 32301			

To: 18506176380 From: 13056820063 Date: 08/20/18 Time: 9:05 AM Page: 02/08

To: 13056820063 From: (Restricted Date: 08/20/10 Time: 7:10 AM Page: 01 850-617-6381 8/20/2018 10:10:37 AM PAGE 1/001 Fax Server



August 20, 2018

FLORIDA DEPARTMENT OF STATE

Division of Corporations

SOUTH FLORIDA LUXURY HOMES, INC 900 BISCAYNE BLVD STE 3502 MIAMI, FL 33132

SUBJECT: SOUTH FLORIDA LUXURY HOMES, INC

REF: P18000024568

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You failed to make the correction(s) requested in our previous letter.

The current name of the entity is as referenced above. Please correct your document accordingly.

It appears you removed the period from the name on the cover letter but not the first page of the amendment.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

FAX Aud. #: H18000240209 Letter Number: 318A00017146 SECRETARY OF A TOP

To: 18506176380 From: 13056820063 Date: 08/17/18 Time: 9:27 AM Page: 02/07

To: 13056820063 From: (Restricted Date: 98/17/18 Time: 6:39 AM Fage: 01 850-617-6381 8/17/2018 9:39:26 AM PAGE 1/001 Fax Server



August 17, 2018

FLORIDA DEPARTMENT OF STATE Division of Corporations

SOUTH FLORIDA LUXURY HOMES, INC 900 BISCAYNE BLVD STE 3502 MIAMI, FL 33132

SUBJECT: SOUTH FLORIDA LUXURY HOMES, INC

REF: P18000024868

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct your document accordingly.

No period after (INC) in the corporate name.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Trene Albritton
Regulatory Specialist TI

FAX Aud. #: E18000240209 Letter Number: 118A00017061

RECEIVE STOR SEGRESSES ALL SECRETARY OF THE SECRETARY OF

To: 18506176380 From: 13056820063 Date: 08/20/18 Time: 8:55 AM Page: 05/08

Articles of Amendment Articles of Incorporation

	Articles of Articles of Le Articles of Le o	corporation	TI TI
South Florida Luxu	ry Homes, Inc		一切の一個
(Name	of Corporation as curren	tly filed with the Florida Dept. of State)	- TO 10
P18000024868			min I
	(Document Number	of Corporation (if known)	25.4
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation adopts the follo	wing amendangat(s) to
A. If amending name, enter the new n	nme of the corporation:		
			The new
"Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	on, ""company," or "incorporated" or th "Co". A professional corporation name m "P.A."	e abbreviation ust contain the
B. Enter pew principal office address,	if applicable.	2875 N.E. 191 Street	
(Principal office address MUST BE A S		Suite 500	
C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)		2875 N.E. 191 Street	
		Sulte 500	
D. If amending the registered agent an new registered agent and/or the new	v registered office address		
Name of New Registered Agent	Sabine Otamendi		
	2875 N.E. 191 Street, S	ulte 500	
	(Florida st	cel address)	_
New Revistered Office Address:	Aventura	33180 Florida)
		(City) (Zi	ip Code)
New Registered Agent's Signature, if el I hereby accept the appointment as registe	ered agent. I am famillar v	with and accept the obligations of the position	.

To: 18506176380 From: 13055820063 Date: 08/20/18 Time: 8:55 AM Page: 06/08

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:

X Change	PI	John Dog				
X Remove	$\underline{\mathbf{v}}$	Mike Iones				
_X Add	<u>\$V</u>	Sally Smith				
Type of Action (Check One)	Title	Name	<u>Addres</u> s			
1) Change	PVTS	Sabine Otamendi	2875 N.E. 191 Street			
X Add			Suite 500			
Remove			Aventura, FL 33180			
2) Change	PVTS	Sabine Otamendi	900 Biscayne Blvd. Ste 3502			
Add			Miami, FL 33132			
X Remove						
3) Change	_					
Add						
Remove						
4) Change						
Add						
Remove						
5) Change						
Add						
Remove						
6) Change						
Add						
Remove						

To: 18506176380 From: 13056820063 Date: 08/20/18 Time: 8:55 AM Page: 07/08

Attach additional	dding additional Ar sheets, if necessary).	(Be specific)	ige(s) nere:		
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provisions for it	provides for an exc nplementing the am cable, Indicate N/A)	thange, reclassiffication	ention, or cancella ontained in the an	ntion of issued shar sendment itself:	e.
		·	·	<u></u>	
				·	
		·			

	August 16, 2018	
The date of each amendment(s)	adoption:, if other tha	n the
date this document was signed.		
A Effective date (f applicable:	ugust 18, 2018	
Enecuve date il applicable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, this date will not be listed a Department of State's records.	is the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	pproved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	n	
• • • • • • • • • • • • • • • • • • • •	(voting group)	
action was not required.	dopted by the board of directors without shareholder action and shareholder dopted by the incorporators without shareholder action and shareholder	
Assessed	DE 2040	
DatedSignature	director, president or other officer - if directors or officers have not been	
selec	ted, by an incorporator - if in the hands of a receiver, trustee, or other court	
аррс	inted fiduciary by that fiduciary)	
	Sabine Otamendi	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	