## P190000 84124

(Ře	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone	e #)
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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPO	DRATION: DECEPTION EXA	AMINERS ASSOCIATES,	CORP
DOCUMENT NUM	D100000084124	****	
The enclosed Article	es of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	ADOLFO E. BARROS		
		Name of Contact Persor	1
	DECEPTION EXAMINERS	ASSOCIATES, CORP	
		Firm/ Company	
	5201 BLUE LAGOON DR.	SUITE 927	
		Address	
	MIAMI, FLORIDA, 33126		
	<del>.</del>	City/ State and Zip Code	2
	ADOLFO.BARROS.DEA@		
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	ion concerning this matter, pleas	se call:	
ADOLFO E. BARR	os	at (	799-5640
Name	e of Contact Person		de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	irtment of State:
☐ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee
Ta	illahassee, FL 32314	2415 [	N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

DESCRIPTION	EVALUATION	ACCOMINATED	CODD
DECEL HON	EXAMINERS	MOOULIAIEO.	CURE

(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P19000084124	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
LUXURY MIAMI, CORP	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A.	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	5201 BLUE LAGOON DR, SUITE 927
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	MIAMI, FLORIDA, 33185
	-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5201 BLUE LAGOON DR, SUITE 927
	MIAMI, FLORIDA, 33185
	3 3 0
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office address	
Name of New Registered Agent	
(Florida s	treet address)
New Registered Office Address:	(City) , Florida (Zip Code)
	(Zip Cial)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	
	, , , ,
Signature of New	Registered Agent, if changing
Check if applicable	
☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11	) (e), F.S.

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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Address</u>
i) Change	<del></del>		··
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			**····
Remove			
5) Change			<u> </u>
Add			
Remove			
6) Change			
Add			<del></del>
Remove			

E. If amending or additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
Request to amend the information aforementioned from Deception Examiners Associates, Corp to new business name of
Luxury Miami, Corp. The address is also to be changed to 5201 BLUE LAGOON DR, SUITE 927 MIAMI, FL
1 submitted via fax the Public Records Exemption Request on 11/13/2019 to ensure my home address 5201 BLUE LAGOON D SUITE 927
Miami, Florida and name is not disclosed, (attached is a copy of the form submitted).
Also to be noted the business of Deception Examiners Associates was associated with polygraph examination, which we will
no longer be conducting; and our business changed to executive transportation and limo services.
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)
Deception Examiners Associates was associated with polygraph examination, and background checks which we will
no longer be conducting or providing. Our business changed to executive transportation and limo services.

The date of each amendment(s) adop	tion:	, if other than the
date this document was signed.		
1/23/20	20	
Effective date <u>if applicable</u> :	(no more than 90 days after am	nendment file date)
	(months man so adju zgrev din	ienament yne date,
<b>Note:</b> If the date inserted in this block document's effective date on the Depart		filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopte action was not required.	d by the incorporators, or board of directo	ors without shareholder action and shareholder
☐ The amendment(s) was/were adopte by the shareholders was/were suffic	d by the shareholders. The number of votilent for approval.	tes cast for the amendment(s)
	red by the shareholders through voting greeh voting group entitled to vote separately	
"The number of votes cast for	the amendment(s) was/were sufficient for	r approval
by		
	(voting group)	
1/23/2020		
Dated		
-	0/300	
Signature	tor, president or other officer - if director	s or officers have not him
selected, b	y an incorporator – if in the hands of a rec	s of officers have not been seiver, trustee, or other court
	fiduciary by that fiduciary)	
Ad	lolfo E. Barros	
<del></del>	(Typed or printed name of person	signing)
Pro	esident	

(Title of person signing)