

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000097829

**Entity Name:** CITINVEST, LLC

**Current Principal Place of Business:**

BAT B APPT 230  
57 RUE DU ROUET  
MARSEILLE, 13008

**Current Mailing Address:**

BAT B. APPT 230  
57 RUE DU ROUET  
MARSEILLE, 13008 FR

**FEI Number:** 98-0599472

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SEGAL, WILLIAM J  
20801 BISCAYNE BOULEVARD  
SUITE 304  
AVENTURA, FL 33180 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name LEVY, HERVE J  
Address BAT B. APPT 230  
57 RUE DU ROUET  
City-State-Zip: MARSEILLE, FRANCE 13008

Title AUTHORIZED REPRESENTATIVE  
Name LEVY, KEVIN ABRAHAM  
Address BAT B APPT 230  
57 RUE DU ROUET  
City-State-Zip: MARSEILLE 13008

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** HERVE LEVY

**MANAGER**

**01/09/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date