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.

MANAGER

SIGNATURE: ANGEL JUNQUERA FERNANDEZ

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No

201 ALHAMBRA CIRCLE

BARED, PABLO R ESQ. 501 CORAL GABLES, FL 33134 US

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

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:

Authorized Person(s) Detail :

Authorized Ferson(5) Detail.			
Title	MGR	Title	MANAGER
Name	JUNQUERA FERNANDEZ, MAURICIO	Name	JUNQUERA FERNANDEZ, ANGEL
Address	201 ALHAMBRA CIRCLE 501	Address	201 ALHAMBRA CIRCLE 501
City-State-Zip:	CORAL GABLES FL 33134	City-State-Zip:	CORAL GABLES FL 33134

2020 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L17000205616

Entity Name: LUXYRISE LLC

Current Principal Place of Business:

201 ALHAMBRA CIRCLE 501 CORAL GABLES, FL 33134

Current Mailing Address:

201 ALHAMBRA CIRCLE 501 CORAL GABLES, FL 33134 US

FEI Number: 82-3447138

Date

FILED Aug 11, 2020 Secretary of State 6859805215CC

08/11/2020

Date