10120 W. BRO BAY HARBOR	ncipal Place of Business: ADVIEW DR. ISLANDS, FL 33154			
Current Mai	iling Address:			
	ROADVIEW DR. DR ISLANDS, FL 33154 US			
FEI Number: 82-3452831			Certificate of Status Desire	ed: No
Name and A	Address of Current Registered Age	nt:		
CORPORATES 4651 SHERIDA SUITE 355 HOLLYWOOD,	-			
The above name	d entity submits this statement for the purpose of cha	anging its registered office or regist	tered agent, or both, in the State of Florid	а.
SIGNATUR				
	E: SALOMON B. ESQUENAZI, AS P	PRESIDENT	()1/25/2023
	Electronic Signature of Registered Agent	RESIDENT	(01/25/2023 Date
Authorized	· · · · ·	PRESIDENT	(
Authorized	Electronic Signature of Registered Agent	PRESIDENT	MGR	
	Electronic Signature of Registered Agent Person(s) Detail :			
Title	Electronic Signature of Registered Agent Person(s) Detail : MGR	Title	MGR	
Title Name	Electronic Signature of Registered Agent Person(s) Detail : MGR COHEN, SUSANA 10120 W. BROADVIEW DR.	Title Name	MGR COHEN, FABIANA 10120 W. BROADVIEW DR.	Date
Title Name Address	Electronic Signature of Registered Agent Person(s) Detail : MGR COHEN, SUSANA 10120 W. BROADVIEW DR.	Title Name Address	MGR COHEN, FABIANA 10120 W. BROADVIEW DR.	Date
Title Name Address City-State-Zip:	Electronic Signature of Registered Agent Person(s) Detail : MGR COHEN, SUSANA 10120 W. BROADVIEW DR. BAY HARBOR ISLANDS FL 33154	Title Name Address	MGR COHEN, FABIANA 10120 W. BROADVIEW DR.	Date
Title Name Address City-State-Zip: Title	Electronic Signature of Registered Agent Person(s) Detail : MGR COHEN, SUSANA 10120 W. BROADVIEW DR. BAY HARBOR ISLANDS FL 33154 MGR	Title Name Address	MGR COHEN, FABIANA 10120 W. BROADVIEW DR.	

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: SUSANA COHEN	MGR
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Electronic Signature of Signing Authorized Person(s) Detail

rrant Dringing, Place of Pusings

Entity Name: SUSU INVESTMENTS, LLC

DOCUMENT# L17000233008

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jan 25, 2023 **Secretary of State** 1389142786CC

01/25/2023 Date