<b>Current Ma</b> P.O. BOX 52 MIAMI, FL				
FEI Number: 82-4309605			Certificate of Status Desired:	No
Name and A	Address of Current Registered Agent:			
LLORET, FRAM 5001 SW 74 CO UNIT 103 MIAMI, FL 331				
The above name	d entity submits this statement for the purpose of changing its re	gistered office or regis	stered agent, or both, in the State of Florida.	
			5	
SIGNATUR	FRANCES MARTIR LLORET			03/2023
SIGNATUR	E: FRANCES MARTIR LLORET Electronic Signature of Registered Agent		02/0	03/2023 Date
			02/0	
	Electronic Signature of Registered Agent	Title	02/0	
Authorized	Electronic Signature of Registered Agent Person(s) Detail :	Title Name	02/0	
Authorized	Electronic Signature of Registered Agent Person(s) Detail : AMBR		02/0	Date
Authorized Title Name	Electronic Signature of Registered Agent Person(s) Detail : AMBR MARTIR, ARMANDO 9330 NW 50 DORAL CIRCLE SOUTH	Name	02/0 AMBR RODRIGUEZ, ANA M 9330 NW 50 DORAL CIRCLE SOUTH	Date
<b>Authorized</b> Title Name Address	Electronic Signature of Registered Agent Person(s) Detail : AMBR MARTIR, ARMANDO 9330 NW 50 DORAL CIRCLE SOUTH	Name Address	02/0 AMBR RODRIGUEZ, ANA M 9330 NW 50 DORAL CIRCLE SOUTH	Date

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: ARMANDO MARTIR

Electronic Signature of Signing Authorized Person(s) Detail

02/03/2023 Date

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

AMBR

DOCUMENT# L18000034177

Entity Name: LUM LUM, LLC

9330 NW 50 DORAL CIRCLE SOUTH

DORAL, FL 33178

**Current Principal Place of Business:**