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Division of Corporations

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Florida Department of State

Division of Corporations

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Foreign Limited Liability Company The Luxury Life, LLC

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February 24, 2024

FLORIDA DEPARTMENT OF STATE
Division of Corporations

FILINGS, INC.

SUBJECT: THE LUXURY LIFE INVESTMENT, LLC
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KYLE D BRUMBLEY FAX Aud. #: H24000073615
Regulatory Specialist II Supervisor Letter Number: 924A00004084
Registration Section

H24000073615

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS
IN FLORIDA**

IN COMPLIANCE WITH SECTION 605.092, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. The Luxury Life, LLC
(Name of Foreign Limited Liability Company, not used for the Limited Liability Company, "LLC" or "LLC")

The Luxury Life Investment, LLC
(If none is available, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name shall include "The Luxury Life Company," "LLC" or "LLC")

2. Delaware 3. _____
(Jurisdiction of law of which foreign limited liability company is organized) (If different, it applies)

4. _____
(Date last organized, not on or prior to registration)
(See note to 605.094 & 605.095, F.S. to determine penalty for delay)

5. 6039 Collins Avenue 6. 6039 Collins Avenue
(Street Address of Principal Office) (Mailing Address)

Suite 708 Suite 708

Miami Beach, Florida 33140 Miami Beach, Florida 33140

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Jonathan D. Louis, P.A.

Office Address: 7777 Glass Road Suite 407

Fort Lauderdale, Florida 33434
(City) (Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

Jonathan D. Louis
President of Jonathan D. Louis, P.A.

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3. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage (up to six (6) total):

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
☒ Manager	Name: <u>Stefania Riverin</u>	☒ Manager	Name: <u>Mark Minassian</u>
☒ Member	Address: <u>6039 Collins Avenue</u>	☒ Member	Address: <u>6039 Collins Avenue</u>
☐ Authorized	<u>Suite 708</u>	☐ Authorized	<u>Suite 708</u>
Person	<u>Miami Beach, Florida 33140</u>	Person	<u>Miami Beach, Florida 33140</u>
☐ Other	☐ Other	☐ Other	☐ Other
 ☒ Manager	Name: <u>Ranin Thawel</u>	☐ Manager	Name: _____
☒ Member	Address: <u>6039 Collins Avenue</u>	☐ Member	Address: _____
☐ Authorized	<u>Suite 708</u>	☐ Authorized	_____
Person	<u>Miami Beach, Florida 33140</u>	Person	_____
☐ Other	☐ Other	☐ Other	☐ Other
 ☐ Manager	Name: _____	☐ Manager	Name: _____
☐ Member	Address: _____	☐ Member	Address: _____
☐ Authorized	_____	☐ Authorized	_____
Person	_____	Person	_____
☐ Other	☐ Other	☐ Other	☐ Other

Important Notice: Use as attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

STEFANIA RIVERIN_____
Signature of authorized person

Stefania Riverin, Manager

Typed or printed name of signer

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Delaware

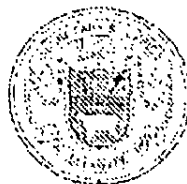
The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "THE LUXURY LIFE LLC" IS DULY FORMED
UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND
HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS
OF THE TWENTY-SECOND DAY OF FEBRUARY, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "THE LUXURY LIFE
LLC" WAS FORMED ON THE FOURTEENTH DAY OF FEBRUARY, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN
ASSESSED TO DATE.



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