15000205708

(Requestor's Name)								
(Address)								
(Address)								
(City/State/Zip/Phone #)								
PICK-UP WAIT MAIL								
(Business Entity Name)								
(Document Number)								
Certified Copies Certificates of Status								
Special Instructions to Filing Officer:								





800420791398

12/28/23--0102?--003 ++25.00

2023 DEC 27 AH 10: 48



COVER LETTER

TO:

INHS18 (2/14)

Registration Section

SUBJECT:	CT: GOLDLUX, LLC								
Name of Limited Liability Company									
Dear Sir or Madam:									
The enclosed Registered Ag	ent/Registered Offic	ce Change and	I fee(s) are submitted for filing.						
Please return all corresponde	ence concerning this	s matter to the	following:						
Meliss	a K. Esquilino								
	ne of Person		<u> </u>						
			,						
Firm	n/Company		<u> </u>						
2142 NW 20	Oth Street, Suite	4							
A	ddress								
Miam	i, FL 33142								
	ate and Zip Code		_						
MEsquiti	no@gmail.com								
E-mail address: (to be		ıal report notif	fication)						
For further information conc	erning this matter, p	please call:							
Melissa K. Es	squilino	_at (<u>754</u>) 248-7274						
Name of Per	son	(Area Code & Daytime Telephone Number						
Mailing Address:			Street Address:						
Registration Section			Registration Section						
Division of Corpor	ations		Division of Corporations						
P.O. Box 6327	714		The Centre of Tallahassee						
Tallahassee, FL 32	314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303						
Enclosed is a check	for the following a	amount:							
№ \$25 Filing Fee		□ \$	55 Filing Fee & Certified Copy						

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	Na	ame of the limited liability company: GOLDLUX ,	LLC					
2	(a)	2142 NW 20th Street	(b)	214	2 NW 20th St	reet		
(u)		Principal office address of limited liability company:			Mailing address of limited liability company:			
		(<u>Note: MUST BE STREET ADDRESS</u>)		(<u>Note:</u>	MAY BE POST O	PFFICE BQ.	X)	
		Suite 4			Suite 4			
		Miami, FL 33142		M	Miami, FL 33142			
		December 9, 2015		L150	00205708			
3.		Date of filing/registration in Florida	4.		nent number			
-	(a)	Gregory K. Esquilino						
J.	(a)	Registered Agent and Registered Office shown on the records of	of the Florida Dep	t. of State.				
		•	·					
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)							
		2142 NW 20th Street, Suite 4				. 21		
					**	2023		
		Miami	L 33142			DEC	i i	
	<i>(</i> 1.)	Moliona K. Enguilina			• •	2	,	
(b) Melissa K. Esquilino						7 -		
			to ville noute.	:				
						A:110: 1,8	4 بد	
		NEW Registered Office Address:				2		
			_					
		ı	:L					
chage wa the	ange ent v is/we e arti	imited liability company is not organized under the lear changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the members cles of organization or the operating agreement of the case of organization or the operating agreement of the case of organization or the operating agreement of the case of organization or the operating agreement of the case of organization or the operating agreement of the case of organization or the operating agreement of the case of organization or the operating agreement of the case of	ne registered of liability compa s of the limited	fice and the buny, it is hereby liability company.	usiness office of y confirmed that any or as otherw	the registe the chang vise provid	ered e(s)	
Signature of a member or authorized representative of a member					Melissa K. Esquilino Printed or typed name of signee			
I i pro the to no	herei ovisi obl mere tified	by accept the appointment as registered agent and as ons of all statutes relative to the proper and complet igations of my position as registered agent as provid ely reflect a change in the registered office address, a I in writing of this change.	gree to act in the e performance led for in Chap I hereby confir			•	ith the l accept ig filed been	
Sig	enatu	te of Registered Agent						