

L19 000020558

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

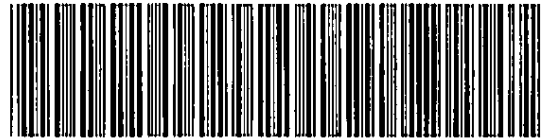
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500394803505

09/28/22--01010--005 \*\*25.00

2022 SEP 28 PM 4:32  
TALLMADGE, OHIO

DEC 22 2022  
S. PRATH

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Luxe Hydration LLC

\_\_\_\_\_  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Richard Geisz

\_\_\_\_\_  
Name of Person

Luxe Hydration LLC

\_\_\_\_\_  
Firm/Company

1319 35th St N

\_\_\_\_\_  
Address

St Petersburg, FL 33713

\_\_\_\_\_  
City/State and Zip Code

rgeisz@luxehydration.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Richard GEisz

248

310-0889

\_\_\_\_\_  
Name of Person

at ( )

\_\_\_\_\_  
Area Code & Daytime Telephone Number

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**Enclosed is a check for the following 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. Name of the limited liability company: Luxe Hydration LLC

2. (a) 1319 35th St N, St Petersburg, FL 33713  
Principal office address of limited liability company:  
(Note: MUST BE STREET ADDRESS)

(b) 1319 35th St N, St Petersburg, FL 33713  
Mailing address of limited liability company:  
(Note: MAY BE POST OFFICE BOX)

3. 01/29/2019 Date of filing/registration in Florida

4. 83-3329354 Document number

5. (a) Richard Geisz  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
200 2nd Ave S #134  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
St Petersburg, FL 33701

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:  
Registered Agents Inc.  
NEW Registered Office Address:  
7901 4th St N STE 300  
St Petersburg, FL 33702

FILED  
2022 SEP 28 PM 4:32  
TALLAHASSEE, FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Richard Geisz  
Signature of a member or authorized representative of a member Printed or typed name of signee

*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 as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified of this change.*

Signature of Registered Agent