

L20000021925

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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CLERK OF STATE  
OFFICE OF CORPORATIONS  
20 APR 26 AM 11:36

RA Change (Office)

APR 14 2020

D CUCHING

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Luxe Ritual 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:

Kaitlin Wilson

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

Luxe Ritual LLC

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

417 10th Ave West

\_\_\_\_\_  
Address

Palmetto, FL 34221

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

kaitlinwils97@gmail.com

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

For further information concerning this matter, please call:

Kaitlin Wilson

941 7827204  
at (\_\_\_\_\_) \_\_\_\_\_

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

\_\_\_\_\_  
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

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OFFICE OF STATE  
CLERK OF CORPORATION  
20 APR 24 AM 11:36

# 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 Ritual LLC

2. (a) 8818 White Sage Loop (b) 8818 White Sage Loop

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

Bradenton, FL 34202

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

Bradenton, FL 34202

04/22/2020

3. Date of filing/registration in Florida 4. Document number

5. (a) Kaitlin Wilson  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

417 10th Ave West

Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**

Palmetto, FL 34221

(b) Kaitlin Wilson  
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

8818 White Sage Loop

**NEW** Registered Office Address:

Bradenton, FL 34202

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CLERK OF STATE  
20 APR 24 AM 11:36  
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.

Kaitlin Wilson  
Signature of a member or authorized representative of a member

Kaitlin Wilson  
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 in writing of this change.

Kaitlin Wilson  
Signature of Registered Agent