LZ1000295385

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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FILED 2023 AUG 18 AM 10: 57 SURVIT AND SEE, FL



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 17, 2023

JENNIFER GARNER 2224 ASHLEY OAKS CIRCLE STE 101 WESLEY CHAPEL, FL 33544 US

SUBJECT: GAIN LUXURY LLC. Ref. Number: L21000295385

We have received your document for GAIN LUXURY LLC. and your charge(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

SHANTELL BROWN Regulatory Specialist II

Letter Number: 223A00011302

COVER LETTER

GAIN LUXURY LLC SUBJECT:	
	ited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	to the following:
Jennifer A. Garner, Esq.	S. 20
Name of Person	TALI
Jennifer A. Garner, PA	AUG 18 AUL AHB
Firm/Company	SSE
2224 Ashley Oaks Circle, Ste 101	2023 AUG 18 AM 10: 57 SECRETARY OF STAT TALLAHASSEE. FL
Address	
Wesley Chapel FL 33544	
City/State and Zip Code	
info@jenniferagarner.com	
E-mail address: (to be used for future annual repor	t notification)
For further information concerning this matter, please c	all:
Jennifer Garner 77	386-9654
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

INHS18 (2/14)

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	ime of the limited liability company: GAIN LUXURY I	LLC	2227 41161	TV OAVE CIDELE STE 101
2. (a)	2224 ASHLEY OAKS CIRCLE, STE 101 Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) WESLEY CHAPEL, FL 33544	_ (b)M	LEY OAKS CIRCLE, STE 101 Initing address of limited liability company: (Note: MAY BE POST OFFICE BOX) CHAPEL, FL 33544
3.	06/25/2021 Date of filing/registration in Florida	- - 4.	L2100029538	35 Document number
<i>5</i> ()	REGISTERED AGENTS INC.			
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State 7901 4TH ST N STE 300 Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
	ST PETERSBURG, FL	33702		2023 AUG 18 AMI SECRLIARY OF TALLAHASSER
(b)	JENNIFER A GARNER, PA			(A)
(0)	Enter name of NEW Registered Agent and/or NEW Registered 2224 ASHLEY OAKS CIRCLE, STE 101	Office a	ddress:	AMID: 57 OF STATE SSEE, FL
	NEW Registered Office Address:			:T) —
	WESLEY CHAPEL , FL	33544		
change agent was/was/was/was/was/was/was/was/was/was/	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the limited of a member or authorized representative of a member by accept the appointment as registered agent and agricultures of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address. The din writing of this change.	vs of the registe obility of the limited	red office and company, it is mited liability liability company. LERIE GABR	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany. HEL Printed or typed name of signee city. I further garee to comply with the