L23000002655

(Requestor's Name)				
(Address)				
(Address)				
(Cit	y/State/Zip/Phone	e #)		
	_	<u></u>		
PICK-UP	WAIT	MAIL		
(Bu	siness Entity Nar	ne)		
(Do	cument Number)			
Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer			
Special instructions to	_			
		1.		
	<u> 23</u>	<u>.</u>) - 5 .		
		ļ		

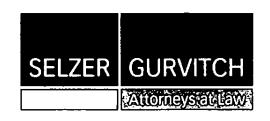
Office Use Only



600418721636

11/14/23--01003--004 **25.00





Julien H. Nam, Paralegal jnam@sgrwlaw.com Direct Dial; 301-634-3162

November 8, 2023

VIA FIRST CLASS MAIL

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, Florida 32303

RE: Statement of Change of Registered Office and Registered Agent Address

Our File No.: 7599.007

Dear Sir or Madam:

Enclosed, please find the Statement of Change of Registered Office and Registered Agent Address for Elevated Luxury Travel LLC along with a check in the amount of \$25.00 made payable to Florida Department of State for the filing fee.

Please feel free to contact me with any questions you may have.

Sincerely yours.

Juli H. Clan

Julien H. Nam

Enclosures

ce: Neil Gurvitch, Esq.

COVER LETTER

TO:	FO: Registration Section Division of Corporations					
SUBJI	ELEVATED LUXURY TRAVEL, L	.LC				
.,		e of Limited Lia	ability Company			
Dear S	ir or Madam:					
The en	closed Registered Agent/Registered Offi	ce Change and f	ee(s) are submitted for filing.			
Please	return all correspondence concerning thi	s matter to the fe	ollowing:			
Jeremy	Gurvitch					
	Name of Person					
ELEV	ATED LUXURY TRAVEL, LLC					
	Firm/Company					
4700 N	36TH CT					
	Address		_			
HOLL	YWOOD, FLORIDA 33021					
	City/State and Zip Code					
-	@elevatedluxurytravel.com					
ł	-mail address: (to be used for future ann	ual report notific	ration)			
For fur	ther information concerning this matter.	please call:				
Jeremy	Gurvitch	240 at (687-5803			
	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		5 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: ELEVATED LU	XURY T	`RAVEL, LLC	· ·
2. (8	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 4700 N 36TH CT	((b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) TH CT
	HOLLYWOOD, FL 33021		HOLLYW	OOD, FL 33021
	12/28/2022		L230000026	555
3.	Date of tiling/registration in Florida	4.		Document number
(I	Registered Agent and Registered Office shown on the records of the Cogency Global Inc. , 115 N Calhoun St., Ste 4, Tallahassee. Registered Office Address (MUST BE FLORIDA STREET ADDITION STATE ADDITION OF ADDI		32301 <u>SS</u> y	23 K. 14 F. 12 24
	HOLLYWOOD F	L 33021		
chan agen was/ the a	e limited liability company is not organized under the lange or changes are made, the Florida street address of that will be identical. Or, in the case of a Florida limited I were authorized by an affirmative vote of the members articles of organization or the operating agreement of the	ws of the registe iability of the limited	red office and company, it is mited liability	d the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in apany.
	mature of a member or authorized representative of a member	-		Printed or typed name of signee
prov the o po no notif	reby accept the appointment as registered agent and ag isions of all statutes relative to the proper and complete obligations of my position as registered agent as provide wash-wallect a change in the registered office address, I fied in writing of this change.	nerforn	nance of my a	luties, and I am familiar with and accept.
Sign	ature of Registered Agent			