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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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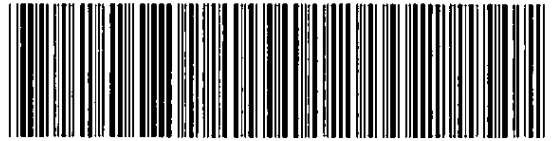
(Business Entity Name)

(Document Number)

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SUNSTYLE GLOBAL FASHION 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:

Michel Stevens

Name of Person

Firm/Company

160 NE 163rd St

Address

Miami Beach, Florida 33162

City/State and Zip Code

keyannaisland94@gmail.com

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

For further information concerning this matter, please call:

Michel Stevens

Name of Person

at ( 510 )

368-8774

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: SUNSTYLE GLOBAL FASHION LLC

2. (a) 160 NE 163rd St

Principal office address of limited liability company:  
(*Note: MUST BE STREET ADDRESS*)

Miami Beach, Florida 33162

(b) 160 NE 163rd St

Mailing address of limited liability company:  
(*Note: MAY BE POST OFFICE BOX*)

Miami Beach, Florida 33162

03/01/2024

3. Date of filing/registration in Florida

M24000003443

4. Document number

5. (a) BENJAMIN ALBERT

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

4161 CARAMBOLA CIR S

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

COCONUT CREEK, FL 33066

(b) Michel Stevens

Enter name of NEW Registered Agent and/or NEW Registered Office address:

160 NE 163rd St

NEW Registered Office Address:

Miami Beach, FL 33162

2024 JUL 22 PM 5:50

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.

Stev Michel  
Signature of a member or authorized representative of a member

Michel Stevens

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.*

Stev Michel  
Signature of Registered Agent