

M24000005904

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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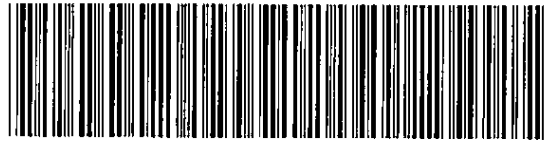
(Business Entity Name)

(Document Number)

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FILED  
2024 JUL 11 AM 11:00  
TALLAHASSEE, FLORIDA  
CLERK OF SUPERIOR COURT

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: THE LUXURY LIFE INVESTMENT 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:

Stefania Riverin

Name of Person

SSM 8 LLC

Firm/Company

3470 E Coast Ave

Address

MIAMI FLORIDA 33137 (PH 203)

City/State and Zip Code

stefaniariverin@gmail.com

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

For further information concerning this matter, please call:

stefania Riverin

Name of Person

at (786) 828 0091

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: THE LUXURY LIFE INVESTMENT
2. (a) ~~3470 E COAST AVE MIAMI FL 33137~~ (b) ~~(b)(1)~~ (b)(2) LLC
- Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)
- Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
- 3470 E COAST AVE MIAMI 3470 E COAST AVE MIAMI
- Florida 33137 (PH203) Florida 33137 (PH203)
3. ~~02/26/24~~ 02/26/24 4. M24000005904
- Date of filing/registration in Florida Document number
5. (a) Jonathan D Louis P.A.
- Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

7777 Glades Rd Ste 315 B

Boca Raton, FL 33434-4171

(b) Stefania Riverin

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

3470 E COAST AVE MIAMI FLORIDA 33137

NEW Registered Office Address:

(PH203)

\_\_\_\_\_, FL \_\_\_\_\_

FILED  
2024 JUL 11 AM 11:00  
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.

Heja K

Signature of a member or authorized representative of a member

Stefania Riverin

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.*

[Signature]

Signature of Registered Agent