## 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000154365

Entity Name: AMS MIAMI LLC

**Current Principal Place of Business:** 

4770 BISCAYNE BLVD., SUITE 1430

MIAMI, FL 33137

**Current Mailing Address:** 

4770 BISCAYNE BLVD., SUITE 1430 MIAMI, FL 33137 US

FEI Number: 85-1580666 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SERFATY LAW PA 4770 BISCAYNE BLVD., SUITE 1430 MIAMI, FL 33137 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: CHARLES S SERFATY, ESQ. 02/14/2023

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

Title **MBR** Title **MBR** 

ALLISON INVESTMENTS SA Name Name MS COMPAGNIE S.A.R. 1

L-2086 LUXEMBOURG, 412F, ROUTE Address Address L-1249 LUXEMBOURG,6 RUE, FORT-

D'ESCH **BOURBON** 

City-State-Zip: LUXEMBOURG AL City-State-Zip: LUXEMBOURG AL

Title MBR Title MGR

Name AS COMPANY Name ALEXANDRE SALVATORE

**SAMMARTINO** 

L-1249 LUXEMBOURG,6 RUE, FORT-Address Address **50 RUE CHARLES ARENDT BOURBON** 

City-State-Zip: LUXEMBOURG AL City-State-Zip: L/1134 LUXEMBOURG AL

Title MGR

Name MARGAUX FLORE SAMMARTINO

Address **50 RUE CHARLES ARENDT** City-State-Zip: L/1134 LUXEMBOURG AL

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ALLISON INVESTMENTS SA

Electronic Signature of Signing Authorized Person(s) Detail

**MBR** 

02/14/2023 Date

**FILED** Feb 14, 2023

**Secretary of State** 

3999407111CC

Date