## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000513914

Entity Name: SPA LUMIERE LLC

**Current Principal Place of Business:** 

8849 HAWBUCK ST UNIT 8 TRINITY,FL, AL 34655

**Current Mailing Address:** 

8849 HAWBUCK ST UNIT 8

TRINITY,FL, AL 34655 US

**FEI Number: APPLIED FOR** Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MURRAY, JOEL M 3917 BALCONY BREEZE DR LAND O LAKES, FL 34638 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:

Electronic Signature of Registered Agent

Date

**FILED** May 03, 2024

**Secretary of State** 

0380468525CC

## Authorized Person(s) Detail:

Title MGR

MURRAY, JOEL M Name

SIGNATURE: JOEL MURRAY

3917 BALCONY BREEZE DR Address City-State-Zip: LAND O LAKES FL 34638

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.

**MGR**