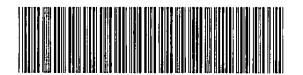
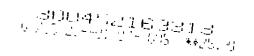
L15000147730

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Sanial Instructions to Filips Officer			
Special Instructions to Filing Officer:			





300452169313



2025 JULY - 5 AM 8: 30

1/27/2023

COVER LETTER

Division of Corporations			
SUBJECT: WU PROPERTY LLC Name of Limited I.	iability 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:		
Xiuping Gao			
Name of Person			
WU PROPERTY LLC Firm/Company			
Firm/Company			
243 Leland Lane			
Address			
Greenaciës FL 33463 City/State and Zip Code			
900 6484@ Yahoo. Com E-mail address: (to be used for future annual report notif	lication)		
For further information concerning this matter, please call:			
Xiy Ping Gao at (347) Name of Person	213532 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		

INHS18 (2/14)

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. Na	Name of the limited liability company: WUPROPE	ERTY LLC	
	243 Leland Lane	(b) 243 Leland Lane	
2. (a)	Principal office address of limited liability company:	Mailing address of limited liability company:	
	(Note: MUST BE STREET ADDRESS)	(Note: MAY BE POST OFFICE BOX)	
	Greenactes	Grenacies	
	FL 33463	FL33463	
	09/02/2015	L15000147730	
3.	Date of filing/registration in Florida 4.	. Document number	
5. (a)	DORNPRINTA, TONY		
J. (u)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:		
	1555NE 123 ST		
	Registered Office Address (MUST BE FLORIDA STREET ADDR.	RESS)	
	NORTH MIAMI	<u></u>	
	.FL =	33161	
(b)	/	<u> </u>	
Enter name of NEW Registered Agent and/or NEW Registered Office address:			
	243 Leland lane		
	NEW Registered Office Address:		
	Greenacres		
	, FL	33463	
16 et . 1	limit of linkiller and an analysis of the latest of the la	feb. Cent. of Florida it is bounded on Euro of the or Accel	
change	limited liability company is not organized under the laws of ge or changes are made, the Florida street address of the regis	istered office and the business office of the registered	
	will be identical. Or, in the case of a Florida limited liability were authorized by an affirmative vote of the members of the		
the arti	ticles of organization or the operating agreement of the limit	ted liability company.	
	hature of a member or authorized representative of a member	Xiu Ping Gao	
provisi the obl to mero notified	beby accept the appointment as registered agent and agree to sions of all statutes relative to the proper and complete perforbigations of my position as registered agent as provided for irely reflect a change in the registered office address. I herebyed in writing of this change.	o act in this capacity. I further agree to comply with the formance of my duties, and I am familiar with and accept in Chapter 605, F.S. Or, if this document is being filed by confirm that the limited liability company has been	
4	ture of Registered Agent		
Signatu	ture of registered agent		