F2000000193S

(Ri	equestor's Name)		
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PICK-UP	☐ WAIT	MAIL	
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Certified Copies	Certificates	of Status	
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COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJ	ECT: THERMOPRO, INC. of Corporation	
Name	of Corporation	
DOC	UMENT NUMBER: F20000001935	
The c	nclosed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this	s matter to the following:
JUN F	IU	
Name	of Contact Person	
Firm/9	Company	
556 N	DIAMOND BAR BLVD STE 213	
Addre	ess	
DIAM	IOND BAR, CA 91765	
City/S	State and Zip Code	
	thermopro@clcllp.com	
E-ma	il address: (to be used for future annua	ll report notification)
For fu	orther information concerning this matter,	please call:
JUN I	ŧU	at (626)512-5134
	Name of Contact Person	at (626) 512-5134 Area Code & Daytime Telephone Number
Enclo	sed is a \$35.00 check made payable to the	Department of State.
	Mailing Address:	Street Address:
	Amendment Section	Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
	rananassee, FL 32314	Tallahassee, FL 32303

CR2E045 (04/13)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a corporation	617.0502, 607.1508, or 617.1508, Florida Statutes, to on organized under the laws of the State of FLORIDA or registered agent, or both, in the State of Florida.				
	C. C	Ç Ç				
2. The principal	1. The name of the corporation: THERMOPRO, INC 2. The principal office address: 556 N DIAMOND BAR BLVD STE 213, DIAMOND BAR, CA 91765					
3. The mailing a	address (if different):					
4. Date of incor	poration/qualification: 04/24/2020	Document number: F20000001935				
	d street address of the current reg rtment of State: (If resigned, ente	istered agent and registered office on file with the resigned)				
	RESIGNED					
			- ;			
6. The name and (if changed):	d street address of the new registe	ered agent (if changed) and /or registered office				
	PARACORP INCORPORATED		1: 2			
	155 OFFICE PLAZA DR 1ST FI	LOOR				
P.O. Box NOT acceptable						
	TALLAHASSEE, FL 32301 US					
The street address changed will	ess of its registered office and the identical.	he street address of the business office of its register	red agent.			
Such change wanthorized by t	as authorized by resolution duly he board, or the corporation has	adopted by its board of directors or by an officer s been notified in writing of the change.	Ю			
JU	IN HU	JUN HU, President				
Signati	ne of an officer or director	Printed or typed name and title				
I further agree of my duties, ar document is be	to comply with the provisions of	agent and agree to act in this capacity. f all statutes relative to the proper and complete pe t the obligation of my position as registered agent. nge in the registered office address, I hereby confir change.	rformanc Or if thi in that the			
	207	08/02/2024				
Sig	anature of Registered Agent	Date				
If signing on bo	chalf of an entity:					
	ETERSON ASST. SESPE	THEY.				

* * * FILING FEE: \$35.00 * * *