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## **COVER LETTER**

TO:	Registration Section Division of Corporations	. 3
SUBJ	(Name of Limite	ed Liability Company)
Dear	Sir or Madam:	
The e	nclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.
Please	e return all correspondence concerning this r	matter to the following:
	tui Song (Name of Person)	
	3DG VIS, LLC (Firm/Company)	2006 OCT 16 PM 12: 28 SECRETARY OF STATE ALLAHASSEE, FLORID
<del></del>	5800 Doones bury Wax (Address)	PM 12: 28  OF STATE E. FLORIDA
	Tallahassee, FL 32303 (City/State and Zip Code)	
For fi	orther information concerning this matter, plo	ease call:
	Hui Song at ( (Name of Person)	(Area Code & Daytime Telephone Number)
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
	Enclosed is a check for the following am	nount:
	\$25 Filing Fee	S55 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 608.416 or 608.508, 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. The name of the limited liability company is: 30G Vi 5, LLC	
2. The mailing address of the limited liability company is: 5800 Doones	bury Way.
Tallahassee FL 32303	
	0040548
3. Date of filing/registration in Florida 4. Document num	
5. The name of the registered agent and the registered office address as shown of Florida Department of State:    Wil fredo Blanco   Name     Name     Address   Apt     Address   Tallahassee   FL 32310   City, State and Zip	2006 OCT 16 SECRETARY TALLAHASSE
6. The name and address of the new registered agent and/or office:    Hui Sovy   Name     5800   Done's bury   Way     Florida street address (P.O. Box NOT acceptable)    Tallahassee   FL 32303     City, State and Zip	PM 12: 28  OF STATE E.FLORIDA
If the limited liability company is not organized under the laws of the State of F confirmed that after the change or changes are made, the Florida street address of and the business office of the registered agent will be identical. Or, in the case of liability company, it is hereby confirmed that the change(s) was/were authorized of the members of the limited liability company or as otherwise provided in the or the operating agreement of the limited liability company.  (Signature of a member of authorized representative of a member)  Hui Song (Printed or typed name of signee)	of the registered office of a Florida limited I by an affirmative vote articles of organization
I hereby accept the appointment as registered agent and agree to act in this cap comply with the provisions of all statutes relative to the proper and complete pe and I am familiar with and accept the obligations of my position as registered a Chapter 608, F.S. Or, if this document is being filed to merely reflect a change address, I hereby confirm that the limited liability company has been notified in	nacity. I juriner agree to rformance of my duties, gent as provided for in in the registered office writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00