

L 05000089646

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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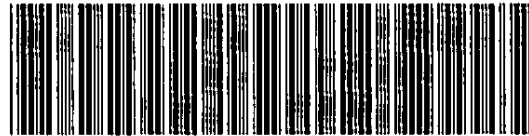
Special Instructions to Filing Officer:

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TALLAHASSEE, FLORIDA

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** FUNG SHING LIMITED LIABILITY COMPANY  
Name of Limited Liability 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:

SUET MUI WONG

Name of Person

FUNG SHING LLC

Firm/Company

14628 KEELFORD WAY

Address

ORLANDO, FL 32824

City/State and Zip Code

winnie0613@msn.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SUET MUI WONG

Name of Person

at ( anytim )

407-913-6388

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 amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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2010 AUG -9 PM 2:55  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

**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. Name of the limited liability company: FUNG SHING LIMITED LIABILITY COMPANY

2. (a) Principal office address of limited liability company: 14602 CABLESHIRE WAY



(Note: MUST BE STREET ADDRESS)

ORLANDO, FL 32824

(b) Mailing address of limited liability company:



(Note: MAY BE POST OFFICE BOX)

14602 CABLESHIRE WAY

ORLANDO, FL 32824

09/12/2005

3. Date of filing/registration in Florida

L05000089646

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State

Registered Agent:

SUET MUI WONG

Registered Office Address:

14602 CABLESHIRE WAY  
ORLANDO, FL 32824

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address

NEW Registered Agent:

SUET MUI WONG

NEW Registered Office Address:

14628 KEELFORD WAY

(MUST BE FLORIDA STREET ADDRESS)

ORLANDO, FL 32824

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Suet Mui Wong  
Signature of a member or authorized representative of a member

SUET MUI WONG

Printed or typed name of signer

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

Suet Mui Wong  
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00