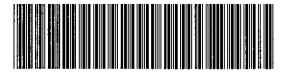
L09000050671

| (Requestor's Name) | | | | | |
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| (Address) | | | | | |
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| (Address) | | | | | |
| | | | | | |
| (City/State/Zip/Phone #) | | | | | |
| PICK-UP | ☐ WAIT | MAIL | | | |
| (Business Entity Name) | | | | | |
| | | | | | |
| (Docu | ment Number) | - | | | |
| | | | | | |
| Certified Copies | Certificate | s of Status | | | |
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| Special Instructions to Filing Officer: | | | | | |
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Office Use Only



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SECRETARY OF STATE OF CORPORATION OF CORPORATION

COVER LETTER

| | egistration Section vision of Corporations | | | | |
|------------|---|--|----------|-------------|--------------------------------|
| SUBJEC | | | | nce, LI | |
| | Name of | Limited | d Liabi | lity Con | npany |
| Dear Sir o | or Madam: | | | | |
| The enclo | sed Registered Agent/Registered | Office (| Change | and fee | e(s) are submitted for filing. |
| Please ret | urn all correspondence concerning | g this m | atter to | the foll | lowing: |
| | Xiao Yan Wang-Shockle | У | | | |
| | Name of Person | | | | |
| | Pacific Alliance, LLC | | | _ | |
| | Firm/Company | | | | |
| | 2600 N Flagler Dr #403 | | | _ | |
| | Addiess | | | | |
| | West Palm Beach, FL 334 | 07 | | | |
| | City/State and Zip Code | | | | |
| E-mail | dalaspb@gmail.com address: (to be used for future annual report | notification | on) | _ | |
| For furthe | er information concerning this ma | tter, ple | ase cal | l: | |
| × | iao Yan Wang-Shockley | at (_ | 561 | _) | 568-1038 |
| | Name of Person | | | Area Cod | e & Daytime Telephone Number |
| | REET/COURIER ADDRESS: | | | | ADDRESS: |
| | gistration Section | Registration Section | | | |
| | vision of Corporations | Division of Corporations P.O. Box 6327 | | | |
| | ifton Building | | | | |
| | 61 Executive Center Circle Ilahassee, Florida 32301 | | ı aı | iianassee | , Florida 32314 |
| Et | nclosed is a check for the follow | ing amo | ount: | | |
| | \$25 Filing Fee | | | 55 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.

| and and a south, at the state of a torrain | |
|--|--|
| Name of the limited liability company: | Pacific Alliance, LLC |
| 2. (a) Principal office address of limited liability company | 2600 N Flagler Dr #403 |
| (Note: MUST BE STREET ADDRESS) | West Palm Beach, FL 33407 |
| (b) Mailing address of limited liability company: | 2600 N Flagler Dr #403 |
| (Note: MAY BE POST OFFICE BOX) | West Palm Beach, FL S |
| May 20, 2009 | L09000050671 |
| 3. Date of filing/registration in Florida | 4. Document number |
| 5. (a) Registered Agent and Registered Office shown on t | the records of the Florida Dept. of Stage: |
| Registered Agent: | David Shockley : (88) |
| Registered Office Address: | 2600 N Flagler Dr #403 |
| | West Palm Beach, FL 33047 |
| (b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u> | W Registered Office address: |
| NEW Registered Agent: | Xiao Yan Wang-Shockley |
| NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) | 2600 N Flagler Dr #403 |
| The state of the s | West Palm Beach ,FL33407 |
| If the limited liability company is not organized under the l confirmed that after the change or changes are made, the Fl and the business office of the registered agent will be identifiability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company | orida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization |
| David Shockley | - |
| Printed or typed name of signee Lharaby account the approintment as registered agent and a | ones to get in this equality. I fouther some to |
| I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the proving and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to men address, I hereby confirm that the limited liability company | gree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office has been notified in writing of this change. |
| X'ao Yan Wang-Shockley | |

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

Signature of Registered Agent