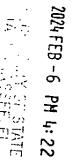






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FILED

## COVER LETTER

	egistration Section ivision of Corporations					
SUBJECT	JOYTECH LLC					
5005170	Name of Limited Liability Company					
Dear Sir o	or Madam:					
The enclo	sed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.				
Please retu	urn all correspondence concerning this n	natter to the following:				
Evelyn Pat	ino					
	Name of Person					
JOYTECH	LLC e/o BenQ America Corp.					
	Firm/Company	<del></del>				
3200 Park	Center Drive, Suite 150					
	Address	<del></del>				
Costa Mes	a, CA 92626					
_	City/State and Zip Code					
CT-StateC	ommunications@wolterskluwer.com					
E-m	ail address: (to be used for future annua	Treport notification)				
For furthe	er information concerning this matter, ple	ease call:				
Evelyn Pat		714 559-4958 ext 6158				
	Name of Person	Area Code & Daytime Telephone Number				
R D C 20	TREET/COURIER ADDRESS: egistration Section fivision of Corporations lifton Building 661 Executive Center Circle fallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
E	nclosed is a check for the following ar	nount:				
7	<b>L</b> \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy				
INHS18 (2	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.

_	JOYTECH LLC		J. JOYTEO	CH LLC		
(a)	Principal office address of limited liability company:		(b)	Mailing address o	of limited liability cor	
	(Note: MUST BE STREET ADDRESS)				<u>BE POST OFFICE E</u>	( <u>OX</u> )
	8350 NW 52nd Terrace Ste 301		8350 NV	V 52nd Terrace St	e 301	
	Miami, FL 33166	_ <del>_</del> _	Miami, F	FL 33166		
	£1/20/2009		1.0900011	1904		
	Date of filing/registration in Florida	— 4.		Document nu	ımber	
	Shih Wei Yeng					
(a)	Registered Agent and Registered Onice shown on the records o	The Flo	rida Dept. of Si	<del></del> tate:		
	Registered Agent and Registered Diffee shown on the records of	i the i k	inda rzepa ca ca	tare.		
				<u></u>		
	Registered Office Address (MUST BE FLORIDA STREET				~	
	8350 NW 52nd Terrew .50 Niemi	rite	301		2024 FEB	
	/					-17
	Mièm, F	L <u>ラ</u>	3106	<u> </u>		
	C.T Corporation System				<u> </u>	
(b)	Enter name of NEW Registered Agent and/or NEW Registere				<u> </u>	<b>5</b>
	Enter name of NEW Registered Agent and/or NEW Registere	d Office	address:			
					PH 4: 27	•
	NEW Registered Office Address:					)
	· · ·					
	1200 South Pine Island Road					
	Plantation , F	. 3332 L	ļ			
he l	imited liability company is not organized under the lange or changes are made, the Florida street address of	ws of	the State of I	Florida, it is here	eby confirmed th	at after
e enta	will be identical. Or, in the case of a Florida limited	n uic i liabilit	gistereu ori company, i	t is hereby confi	irmed that the ch	inge(s)
s/w	ere authorized by an affirmative vote of the members	of the	limited liabi	lity company or	as otherwise pro	vided in
arti	icles of organization or the operating agreement of th	e hmit				
	dure of Amember or authorized representative of a member	_	- Key,	Frinted or type	rxu	
vigna	dure of member or authorized representative of a member		/	Printed or type	d name of signee	
we	by accept the appointment as registered agent and ag	gree to	act in this c	apacity. I furthe	er agree to compl	v with th
ovisi e obi	ions of all statutes relative to the proper and completed ligations of my position as registered agent as provide by reflect a change in the registered office address.	e perja led for	rmance of n in Chapter 6	wannes, ana 1 c 805, F.S. Or if t	um jamutar with this document is l	ana acce being file
mer difi-	elv reflect a change in the registered office address. I in writing of this change.	l héreb	v confirm th	at the limited lia	ibility company h	as heen
Hic	C T Corporation System					

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

Signature of Registered Agent