130000 tolo52

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
JAN - 8 2025					

Office Use Only



600441756146

FILED 2025JAN -7 AH 9: 47



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: **866.625.0838** F: **866.625.0839** COGENCYGLOBAL.COM

Account#: 120000000088
If there are any issues
please contact Cheyanne at
850-202-1882

Date:	01/07/2025	
Name:	Cheyanne Davis	
Reference	#:2593530	
	e: L	PGA ASIA, LLC
	eles of Incorporation/Authoriz	
☐ Ame	endment	
✓ Cha	nge of Agent	
Rein	estatement	
Con	version	
☐ Mer	ger	
☐ Diss	olution/Withdrawal	
☐ Ficti	tious Name	
☐ Othe	er	
Authorized	Amount: \$25.00	
Signature:	(Phyma Paine	

F: +852.2682.9790



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088 If there are any issues please contact Patrice at 850-202-9071

Date:	01/07/2025	
Name:	Cheyanne Davis	<u> </u>
Reference #:	2593530	<u> </u>
		A ASIA, LLC
Article	s of Incorporation/Authorization	n to Transact Business
Amen	dment	
	ge of Agent	
☐ Reinst	atement	
Conve	ersion	
☐ Merge	ı	
☐ Dissol	ution/Withdrawal	
Fictitio	ous Na me	
Other_		
Authorized Ai	mount: \$25.00	
Signature:	Chyma Paire	

F: 800.944.6607

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.

2. (a)			(b	}	
	Principal office address of limited lia (Note: MUST BE STREET A				Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	No Change		_ _	No C	Change
	May 9, 2013		_		L13000068652
3.	Date of filing/registration in	Florida	4.	_	Document number
5. (a)	CAPITOL CORPORATE SER	VICES, INC.			
/. (u)	Registered Agent and Registered Office show	on on the records of	the Florida	Dept. of	(State:
	515 EAST PARK AVENUE 2N	ID FLOOR			_
	Registered Office Address (MUST BE F	LORIDA STREET_	1DDRESS	1	1025
	STE. A				
	TALLAHASSEE	, FL	32301	_	
(b)	COGENCY GLOBAL INC.				2025JAH-7 AH 9: 47
(,	Enter name of <u>NEW Registered Agent</u> and/o	or <u>NEW Registered</u>	Office add	iress:	
	115 North Calhoun St., Suite	1			्राहुतः वि न्ध
	NEW Registered Office Address:				
	Tallahassee	, FL	32301		
the changent was/we	nge or changes are made, the Florida will be identical. Or, in the case of a large authorized by an affirmative vote of elessof organization or the operating a	street address of florida limited lia of the members o	the regis ability co of the lim	stered of impany, ited liab	of Florida, it is hereby confirmed that after office and the business office of the register, it is hereby confirmed that the change(s) billity company or as otherwise provided in company.
M Lighth http:// Signature of a member or authorized representative of a member			<u>M</u> .	M. Elizabeth Moore	
	are of a member or authorized representative.	of a member			Printed or typed name of signee

/s/ Timothy Mayville
Signature of Registered Agent

Timothy Mayville, Assistant Secretary
Division of Corporations ◆ P.O. Box 6327 ◆ Tallahassee, FL 32314
FILING FEE: S25.00