

L/3000085312

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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PA
Change

09/16/14--01015--010 **25.00

FILED
2014 SEP 16 PM 3:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DR
9/17/14



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
4 SEP 15 PM 1:59
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

September 3, 2014

David J. Bechtold
Long Sheng Technologies
1002 S. Harbour Island Blvd #1207
Tampa, FL 33602

SUBJECT: LONG SHENG TECHNOLOGIES LLC
Ref. Number: L13000085312

We have received your document for LONG SHENG TECHNOLOGIES LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

The form you submitted is for a Florida profit corporation, but your entity is a Florida limited liability company. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Annette Ramsey
Regulatory Specialist II

Letter Number: 214A00018735

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Long Sheng Technologies, LLC
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:

David Bechtold

Name of Person

Long Sheng Technologies, LLC

Firm/Company

1002 S Harbour Island Blvd. #1207

Address

Tampa FL 33602

City/State and Zip Code

dbechtold0719@gmail.com

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

For further information concerning this matter, please call:

David Bechtold

Name of Person

at (808) 352-1250

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

**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.

1. Name of the limited liability company: Long sheng Technologies, LLC

2. (a) 1002 S. Harbour Island Blvd. #1207 (b) Same

Principal office address of limited liability company:

Mailing address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

(Note: **MAY BE POST OFFICE BOX**)

Tampa, FL 33602

6/13/2013

L 13000085312

3. Date of filing/registration in Florida

4. Document number

5. (a) United States Corporations Agent, INC

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

13302 Winding Oaks Court Suite A
Tampa, FL 33612

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

(b) _____

Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

David Bechtold

NEW Registered Office Address:

1002 S. Harbour Island Blvd. #1207

Tampa, FL 33602

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.

Signature of a member or authorized representative of a member

Printed or typed name of signer

KO-HUI TUNG

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 605, 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.

Signature of Registered Agent

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