## 1130001119

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





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## **COVER LETTER**

TO: A Registration Section Division of Corporations						
SUBJECT: Acer Snowmec International LI	_C					
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 m	natter to the following:					
Kerry Huang						
Name of Person	<del> </del>					
Acer Snowmec International LLC						
Firm/Company	<del></del>					
14620 Riviera Pointe Dr						
Address						
Orlando, FL 32828						
City/State and Zip Code						
kerryhuang@comcast.net						
E-mail address: (to be used for future annual	report notification)					
For further information concerning this matter, ple	ase call:					
Kerry Huang	407 883-8948					
Name of Person	Area Code & Daytime Telephone Number					
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS:					
Division of Corporations	Registration Section Division of Corporations					
Clifton Building	P.O. Box 6327					
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314					
Enclosed is a check for the following amount:						
\$25 Filing Fee	□ \$55 Filing Fee & Certified Copy					

INHS18 (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.

1. N	Ime of the limited liability company:  Acer Snowmed	<del>.</del>				
2. (a)	14620 Riviera Pointe Dr	(b) 14620 Riviera Pointe Dr				
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	Mailing address of lim (Note: MAY BE PC				
3.	12   06   2013  Date of filing/registration in Florida	4.	L1300			ent number
5. (a)	LegalZoom					
	Registered Agent and Registered Office shown on the records of the 13302 Winding Oak Court Suite A	e Fiorida Dept.	oi State:			
	Registered Office Address (MUST BE FLORIDA STREET A)	DDRESS)				
	Tampa ,FL	33612				
(b)	Kerry Huang			and the second	2016	****
, ,	Enter name of NEW Registered Agent and/or NEW Registered (	Office address:	<u> </u>	Tribi Turk		-
	14620 Riviera Pointe Dr			HESSY.	5	Company Internation
	NEW Registered Office Address:			E. FLORIDA	D 12: ;	m O
	Orlando , FL	32828		DE A	26	
he changent was/wehe arti	imited liability company is not organized under the law nge or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited lial at the authorized by an affirmative vote of the members of cles of organization or the operating agreement of the limited liability.	s of the State he registered bility compa- the limited l	l office and t ny, it is herel liability com ity company.	he busines by confirm pany or as	s officated that otherw	e of the register the change(s) vise provided in
I herei provisi the obl to mero notified	by accept the appointment as registered agent and agree on so fall statutes relative to the proper and complete pigations of my position as registered agent as provided ely reflect a change in the registered office address, I had in writing of this change	e to act in th verformance for in Chapt ereby confir	ie canacity	I further	aree te	a comply with th