140000/8903

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Office Use Only

 \mathbf{A}^{*}



02/12/14--01023--006 **25.00



FEB 1 3 2014

T CLINE

ATTORNEYS CORPORATION SERVICE, INC. 5668 EAST 61ST STREET COMMERCE, CA 90040 TEL: (800) 462-5487 ext.133 FAX: (800) 388-0330 EMAIL: ttran@attorneyscorpservice.com

DOCUMENT FILING REQUEST LETTER

REQUEST FILING SERVICE

DATE: 2/10/2014

FROM: TENG TRAN

Client Matter: # 457874

TO: DEPARTMENT OF STATE DIVISION OF CORPORATIONS CLIFTON BUILDING **2661 EXECUTIVE CENTER CIRCLE** TALLAHASSEE, FL 32301

ATTN: DOCUMENT FILING DIVISION

RE: Pulsar Trading Advisors LLC

Enclosed is one of the following: (1) Statement of Change

014 FEB 12 PH 12:

Return request with filing: (1) Plain Copy

Return request via following: (X) Priority Mail/Email

Total Page(s) attached including transmittal page: ()

Fax/Email a copy of the filed documents upon acceptance of filing

PLEASE RETURN FILED DOCUMENTS ATTACHED WITH AN INVOICE TO: **ATTORNEYS CORPORATION SERVICE, INC.** 5668 E. 61st STREET COMMERCE, CA 90040

PLEASE CONFIRM UPON RECEIVED DOCUMENTS

NOTE(S):

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Pulsar Trading Advisors 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:

Teng Tran (Name of Person) **Rocket Lawyer** 2014 FEB 12 PH 12: (Firm/Company) 5668 E 61st St (Address) Commerce CA 90040 2 (City/State and Zip Code) For further information concerning this matter, please call:) 462-5487 x133 Teng Tran 800 at ((Area Code & Daytime Telephone Number) (Name of Person) MAILING ADDRESS: **STREET/COURIER ADDRESS:** Registration Section Registration-Section-**Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, Florida 32314 2661 Executive Center Circle Tallahassee, Florida 32301 Enclosed is a check for the following amount: **\$55** Filing Fee & Certified Copy ✓ \$25 Filing Fee

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.

1. Name of the limited liability company: Pulsar T	rading Advisors LLC	_	
 (a) Principal office address of limited liability com (<u>Note: MUST BE STREET ADDRESS</u>) 	pany:		
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
02/03/2014	L14000018903	2814	
3. Date of filing/registration in Florida	4. Document number	FEB	- (*)
5. (a) Registered Agent and Registered Office show	n on the records of the Florida Dept. of St	and the second	
Registered Agent:	SHEEHAN, SEAN		1 . I 1 . I
Registered Office Address:	3147 HAMBLIN WAY WEST PALM BEACH. FL 33414	PH12: 25	^ي و ۽ يا
(b) Enter name of <u>NEW Registered Agent</u> and/or	NEW Registered Office address:		
NOW Desistand Agent.	Stephen T. Palmer		

<u>NEW</u> Registered Agent:

<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) Palmer Financial Consulting 4755 Technology Way Boca Raton______,FL_33431_____

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)

Yoochul Chong (Printed or typed name of signee)

4

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 608, F.S. Or it this document is being filed to merely reflect a change in the registered office address, I hereby confirming of this change.

6 (Signature of Registered Agent) /

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

INHS18 (05/08)