## L14000122841

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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## COVER LETTER

Division of Corporations			
SUBJECT: Ngo investments LC  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:			
Kimphu Nopo Name of Person			
Ngo investments LLC Firm/Company			
1416 NW 6th AVE			
Ft Lauderdale, FL 33302 33311 City/State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Kmphu Nepo at (425 ) 233 - 0476 2 - 6 pm  Name of Person 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			
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. Na	me of the limited liability company:	estments LLC
2. (a)	Principal office address of limited liability company:	(b)
	( <u>Note: MUST BE STREET ADDRESS</u> )	(Note: MAY BE POST OFFICE BOX)
	1416 NW 6 XVE	1416 NW 6th AVE
	A Landerdale, FL 33311	Ft Landerdale, FL 3331
	8515	114000122841
3.	Date of filing/registration in Florida	4. Document number
5. (a)	Legal TNC CORPORATE SELVICON Registered Agent and Registered Office shown on the records of the	
	Registered Office Address (MUST BE FLORIDA STREET AL	DDRESS)
	2846 NW 79th AVE	AS
	Doral FL	33122 EFF = TI
(b)	Enter name of NEW Registered Agend and or NEW Registered O	estments LLC 3776 3 17
	1416 NW 6th AVE NEW Registered Office Address:	PH : 29 PH : 29
	Ft Landerdale, FL 33311	· · · · · · · · · · · · · · · · · · ·
	, FL, FL	<del> </del>
the cha agent v was/we	inge or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liab	
Signa	ture of a member or authorized representative of a member	Printed or typed name of signed
I here provisi the obl to mer	by accept the appointment as registered agent and agre	e to act in this capacity. I further agree to comply with the erformance of my duties, and I am familiar with and accept for in Chapter 605, F.S. Or, if this document is being filed creby confirm that the limited liability company has been