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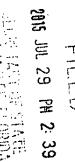
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PICK-UP	☐ WAIT	MAIL			
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Special Instructions to Filing Officer:					
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COYER LETTER

TO:	Registration Section Division of Corporations					
SUBJ	ECT: Leyi, LLC					
Name of Limited Liability Company						
Dear S	Sir or Madam:					
The er	nclosed Registered Agent/Registered Off	fice Change and f	fee(s) are submitted for filing.			
Please	return all correspondence concerning th	is matter to the f	following:			
Shuy	ri Si					
	Name of Person		_			
Leyi,	LLC					
	Firm/Company		_			
1923	4 S. Gardenia Ave					
	Address					
	ton, FL 33332	••				
	City/State and Zip Code		_			
steve	esi88@hotmail.com					
F	E-mail address: (to be used for future ann	nual report notific	cation)			
For fu	rther information concerning this matter,	, please call:				
Shuy	i Si	954 at (288 0219			
	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	Reg Divi P.O.	ILING ADDRESS: istration Section ision of Corporations . Box 6327 ahassee, Florida 32314			
\mathcal{L}'	Enclosed is a check for the following	amount:				
-	\$25 Filing Fee	□ \$55	5 Filing Fee & Certified Copy			
INHST	8 (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.

l. Na	nne of the limited liability company: LEYI, LLC				
2. (a)	19234 S. Gardenia Ave	1	_{b)} 19234 S		
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ '		lailing address of limited (Note: MAY BE POS)	
	Weston, FL 33332		Weston,	FL 33332	
	02/02/2015	_	L1500001	9800	
3.	Date of filing/registration in Florida	4.	1	Document number	
5. (a)	CORPORATION SERVICE COMPANY				
(,	Registered Agent and Registered Office shown on the records of t	he Florid	la Dept, of State:		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 1201 HAYS STREET				29
	TALLAHASSEE , FL	3230			PH 2
(b)	Shuyi Si Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office a	ddress:		39 39
	NEW Registered Office Address:				
	19234 S. Gardenia Ave				
	Weston , FL	33332	2		
the cha agent w was/we	mited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia- are authorized by an affirmative vote of the members of clessof organization or the operating agreement of the	the reg ibility of f the lii	istered office company, it is mited liability	and the business of hereby confirmed the company or as other	fice of the registered hat the change(s)
0	Janai Si	Sh	uyi Si		
Signar	dire of a member of authorized representative of a member			Printed or typed name o	fsignee
provision the obli to mere	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I have the property of this change.	ee to ac perforn I for in iereby c	et in this capa nance of my d Chapter 605, confirm that th	city. I further agree uties, and I am fam F.S. Or, if this doc he limited liability c	e to comply with the iliar with and accept ument is being filed ompany has been
Signatur	2 MW1 7 Te of Registered Agent				