L16000117792

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COVER LETTER

TO: Registration Section . **Division of Corporations**

- - - +

SUBJECT: Venetion Park Place 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:

<u>Huu Ton</u> Name of Person <u>Venetian Park Place LLC</u> Firm/Company

5560 N Military Trail # 308

Boca Raton, FL 33496 City/State and Zip Code

Venetian 5560 @ gmail. lom E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

<u>HINN TON</u> Name of Person at (561) 440 - 888 Area Code & Daytime Telephone Number

Street Address: Registration Section

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Enclosed is a check for the following amount:

M S25 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: Venetian Park Place LLC
2. (a) <u>5560 N Militwy Tymi # 308</u> (b) Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>) (b) <u>Mailing address of limited liability company:</u> (<u>Note: MAY BE POST OFFICE BOX</u>)
Boca Raton
FL 33496
$\frac{6/17/2016}{\text{Date of filing/registration in Florida}} 4. \qquad \frac{L16000117792}{\text{Document number}}$
5. (a) <u>Nguym</u> <u>Hy</u> Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
<u>5560 N Mili Fary Trail # 308</u> Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
Bola Raton
FL 33496
(b) <u>Hun Ton</u> Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :
<u>5560 N Military Trail #308</u> <u>NEW</u> Registered Office Address:
Bola Raton
.FL 33496
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 signee
Signature of a member or authorized representative of a member Printed or typed name of signee I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the
The obligations of all statutes relative to the proper and complete performance of mv duties, and I am familiar with and accept the obligations of mv position as registered agent as provided for in Chapter 605 FS. Or if this document is being filed

Thereby accept the appointment as registered agent and agree to act in this capacity. Thather 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. Thereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

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