## 16000210683

(Requestor's Name)								
(Address)								
(Address)								
(City/State/Zip/Phone #)								
PICK-UP WAIT MAIL								
(Business Entity Name)								
(Document Number)								
Certified Copies Certificates of Status								
Special Instructions to Filing Officer:								
1								

Office Use Only



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1 17 3 1 2023

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

		ACCOU	NO.	:	I2000000195					
		REF	ERENCE	:	622028 8409333					
		AUTHORIZ	ZATION	:	Expirate man					
		COST	LIMIT	:	\$ 25.00					
ORDER 1	DATE :	March 29,	2023							
ORDER '	TIME :	8:03 AM								
ORDER 1	NO. :	622028-015	5							
CUSTOM	ER NO:	8409333	3							
<u>CHANGE OF AGENT</u>										
	NAME:	H' DYOUN	NG LLC							
PLEASE	RETURN	THE FOLLOW	VING AS	PRO	OOF OF FILING:					
XX		FIED COPY STAMPED CO	PY							

EXAMINER:

CONTACT PERSON: Alexxis Weiland-sorenson -- EXT#

## 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	ame of the limited liability company:  H'DYOUNG LI	LC					
			b)				
,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	`	*	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)			
	2100 Ponce de Leon Blvd Suite 860	2100 Ponce de Leon Blvd Suite 86					
	Coral Gables, FL 33134		Coral Gab	oles, FL 33134			
	11/17/2016		L16000210	0683			
3.	Date of filing/registration in Florida	4.		Document number		<u> </u>	
5. (a)				_			
	Registered Agent and Registered Office shown on the records of VGV (US) LLC	of the Florid	a Dept. of State	::			
	Registered Office Address (MUST BE FLORIDA STREET	egistered Office Address (MUST BE FLORIDA STREET ADDRESS)					
	2100 Ponce de Leon Blvd Suite 860			7117			
	Coral Gables			zuzs MAR S	•		
( <b>L</b> )					30		
(b)	Enter name of NEW Registered Agent and/or NEW Registered				PH	r <del>-</del>	
	Corporation Service Company			,	, 27	العب ا	
	NEW Registered Office Address:			-	•		
	1201 Hays Street			-			
	Tallahassee F	L_32301					
change agent v was/we	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited leave authorized by an affirmative vote of the members icles of organization or the operating agreement of the	e register liability co of the lin e limited	ed office and ompany, it is nited liability liability com	I the business office of hereby confirmed that company or as otherw pany.	the register the change	ed (s)	
	celina Castillo de Marin	<u>М</u> а	Marcelina Castillo de Marín, Manager				
I here provisi the obl to mero notified	ture of a member or authorized representative of a member by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as providely reflect a change in the registered office address. If it is change,	gree to act e perform ed for in ( hereby c	in this capa ance of my d Chapter 605, onfirm that t	Printed or typed name of significity. I further agree to luties, and I am familian F.S. Or, if this documble limited liability comp	-	th the accept g filed gen	
	E. Kirby, Asst. Vice President on behalf of Corporation Service Co	ompany					

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