## 11700016388

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ALLAHASSEE, FLORIUA

J. LEGGETT MAY 0 3 2018

## **COVER LETTER**

Division of Corporations		
SUBJECT: MIAMI 8135 LLC	•	
-	Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office C	hange and fee(s) are submitted for filing.	
Please return all correspondence concerning this ma	tter to the following:	
Yu He Huang		
Name of Person	<del></del>	
MIAMI 8135 LLC		
Firm/Company		
8655 SW 152nd Ave #144		
Address	<del></del>	
Miami, FL 33193		
City/State and Zip Code	<del></del>	
mhsu@foxmail.com		
E-mail address: (to be used for future annual re	eport notification)	
For further information concerning this matter, please	se call:	
Jie Mei Wu	917 257-8960	
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 amo	unt:	
<b>☑</b> \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy	

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	ame of the limited liability company: MIAMI 8135 I	LLC		
2. (a)		(b	) .	
, ,	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_ `	N	Mailing address of limited liability company:  (Note: MÁY BE POST OFFICE BOX)
	34-20 83RD ST 4D		34-20 83	BRD ST 4D
	Jackson Hts,NY 11372	_	Jackson	Hts,NY 11372
	1/23/2017		L1700001	6388
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	PORNPRINYA, TONY			
3. (a)	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of State	: :
	Registered Office Address (MUST BE FLORIDA STREET)	4DDRESS	<del></del> !	
	1555 NE 123 STREET			27 🐱
	NORTH MIAMI . FL	33161		
(b)				SSS 1
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office ado	lress:	
	Yu He Huang			
	NEW Registered Office Address:			32
	8655 SW 152nd Ave #144			
	Miami , FL	33193		
the cha agent v was/we the arti	imited liability company is not organized under the layinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited like authorized by an affirmative vote of the members of cles of organization or the operating agreement of the ture of a member or authorized representative of a member	the regisability co	tered office mpany, it is ited liability lability com	and the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in
I here provisi the obl to mere notified	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address, I do in writing of this change.	ee to act performe d for in C hereby co	in this capa ince of my d hapter 605 infirm that t	ncity. I further agree to comply with the duties, and I am familiar with and accept , F.S. Or, if this document is being filed the limited liability company has been
Signatu	re of Registered Algent			