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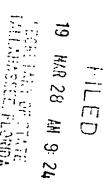
(Requestor's Name)					
(Address)					
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(City	/State/Zip/Phone	#)			
PICK-UP	☐ WAIT	MAIL			
(Bus	iness Entity Nam	e)			
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COVER LETTER

TO:

INHS18 (2/14)

Registration Section

Divi	sion of Corporations					
SUBJECT:	Onyx Management LLC					
SOBJECT.	Name of Limited Liability Company					
Dear Sir or M	Madam:					
The enclosed	d Registered Agent/Registered Offic	e Change and fe	ee(s) are submitted for filing.			
Please return	all correspondence concerning this	matter to the fo	llowing:			
Karen Had						
	Name of Person		-			
Onyx Man	agement					
· · · · · · · · · · · · · · · · · · ·	Firm/Company		-			
13380 Pol	o Rd W, #A-101					
	Address		-			
Wellington	, FL 33414					
	City/State and Zip Code		-			
k.haohao@	gmail.com					
E-mail	address: (to be used for future annu	al report notifica	ntion)			
For further in	nformation concerning this matter, p	lease call:				
Karen Hao		310 at (619-4462			
	Name of Person		Area Code & Daytime Telephone Number			
Regi Divis Clifto 2661	EET/COURIER ADDRESS: stration Section sion of Corporations on Building Executive Center Circle thassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
Encl	osed is a check for the following a	mount:				
☑ \$2	25 Filing Fee	3 \$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. Na	ame of the limited liability company: Onyx Managen	nent l	_LC	
2. (a)	13380 Polo Rd W #A-101	(b) 13380 Polo Rd W #A-101		
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	- (,		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Wellington, FL 33414	-	Wellingto	on, FL 33414
	4/13/2017	-	L1700008	33129
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	UNITED STATES CORPORATION AGENTS,	INC.		
	Registered Agent and Registered Office shown on the records of the 13302 WINDING OAK COURT	: Florida	a Dept. of State	· ::
	Registered Office Address (MUST BE FLORIDA STREET AD	<u>DDRESS</u>	5)	
	TAMPA	3612		· ·
(b)	Karen Hao			6
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered O</u>	ffice ad	dress:	TAN 2
	13380 Polo Rd W. #A-101			LED ≥8 M
	NEW Registered Office Address:		· · · · · · · · · · · · · · · · · · ·	M 9: 24
	Wellington FL 33	3414		
the cha agent w was/we	mited liability company is not organized under the laws nge or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liability authorized by an affirmative vote of the members of the cles of organization or the operating agreement of the limited liability.	e regis ility co the lim nited l	stered office ompany, it is lited liability liability com	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
- Vianat	ure of anyember or authorized representative of a member	Kar	en Hao	
l hereb provision the oblinito mere notifica	ny accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pergations of my position as registered agent as provided for the reflect a change in the registered office address, I here in writing of his change.	to act erform or in C reby co	in this capa ance of my a Thapter 605, onfirm that t	Printed or typed name of signee noity. I further agree to comply with the luties, and I am familiar with and accept F.S. Or, if this document is being filed the limited liability company has been