## 217000104124

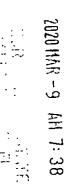
stor's Name)							
SS)							
ss)							
(City/State/Zip/Phone #)							
WAIT	MAIL						
ess Entity Nar	me)						
(Document Number)							
Certificate	s of Status						
Special Instructions to Filing Officer:							
	ate/Zip/Phon WAIT  Sess Entity National Number) Certificate:						

Office Use Only



400341696114

03/09/20--01024--012 \*\*25.00



O SIMMONS MAR 26 2020

## **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT: CHAU FU	UBJECT: CHAU FUTURE, LLC  Name of Limited Liability Company								
Dear Sir or Madam:									
The enclosed Registered Agent/Registere	ed Office Change and	fee(s) are submitted for filing.							
Please return all correspondence concern	ing this matter to the	following:							
DUNG CHAU Name of Person		_ <del></del>							
Firm/Company									
5855 115TH CIR N									
Address		<del></del>							
PINELLAS PARK FL 337	82	<u></u>							
City/State and Zip C	Code								
E-mail address: (to be used for futt	re annual report noti	fication)							
For further information concerning this t	natter, please call:								
DUNG CHAU	at (_727	) 793-4999							
Name of Person		Area Code & Daytime Telephone Number							
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		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 foll	owing amount:								
☑ \$25 Filing Fee	<b>ū</b> \$	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.

١.	Na	me of the limited liability company: CHAU FUTU	RE, LLC	<u> </u>			
2.	(a)		(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)			mpany:
		10500 ULMERTON ROAD., STE 288		5855 115TH CIR N	J		
		LARGO, FL 33771		PINELLAS PARK,	FL 33782		
		05/10/2017		L17000104124			
3.		Date of filing/registration in Florida	4.	Document no	umber		
5.	(a)						
-	()	Registered Agent and Registered Office shown on the records of t	he Florida I	Dept. of State:			
		HAI CHAU				2020 HAR	
		Registered Office Address (MUST BE FLORIDA STREET A	(DDRESS)		2.2	1	
		5895 115TH CIRCLE NORTH			•	? −9	
		PINELLAS PARK , FL	33782	<del></del>		HW 6	
	41.5				•,• <del>,•</del>	7: 39	* ******
	(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office addr	<u>'(\$55</u> :	行為	39	
		DUNG CHAU					
		NEW Registered Office Address:					
		5855 115TH CIR N		<u></u>			
		DINIELLAC DADY EL	22702				
		PINELLAS PARK, , FL.	_33/82_	<u>-</u>			
cha age was the	inge ent v s/we arti	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative year of the members or oles of organization or the operating agreement of the law	registered bility com f the limit	office and the business pany, it is hereby confed liability company or bility company.  Duns Ch	s office of the sirmed that the state of the sirmed that the same of the same of the sirme of th	he regi the cha ise pro	istered inge(s)
	(	ture of strember of authorized representative of a member		Ofinted or type			
l h pro the to i not	visi obl nere ifiec	by accept the appointment as registered agent and agro ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I h I in syring of this change.	ee to act in performan I for in Ch pereby con	n this capacity. I furthe ice of my duties, and Lo apter 605, F.S. Or, if i firm that the limited lia	er agree to am familiar this docume thility comp	comply with a ent is b oany ha	e with the and accept eing filed as been
Sig	natu	re of Regimered Agent					