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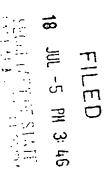
(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				





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K SALY

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: SK CAPITAL LLC					
Name of Limited Liability Company					
Dear Sir or Madam:					
The enclosed Registered Agent/Register	ered Office Change and fee(s) are submitted for filing.				
Please return all correspondence conce	erning this matter to the following:				
YIRAN WANG					
Name of Perso	on .				
SK CAPITAL LLC					
Firm/Compan	y				
3627 NW 15 ST					
Address					
MIAMI, FL 33125					
City/State and Zip	o Code				
kellywyr@hotmail.com					
E-mail address: (to be used for fu	iture annual report notification)				
For further information concerning this	s matter, please call:				
JIA SONG	786 8601826				
Name of Person					
STREET/COURIER ADDR! Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	ESS: MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
Enclosed is a check for the fo	ollowing amount:				
△ \$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.

i. Na	une of the limited liability company: SK CAPITAL L	LC_	
2. (a)	3627 NW 15 ST,	(b) 3627 NW 15 ST,	
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	\\-	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	MIAMI, FL 33125	_ <u> </u>	MIAMI, FL 33125
	05/25/2017	 <u>L</u> 1	17000115948
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	UNITED STATES CORPORATION AGENTS	, INC.	
<i>J.</i> (u)	Registered Agent and Registered Office shown on the records of the 13302 WINDING OAK COURT		ept. of State:
	Registered Office Address (MUST BE FLORIDA STREET A)	DDRESS)	
	<u>A</u>		7 % 8
	TAMPA FL.	33612	<u> </u>
(b)	YIRAN WANG Enter name of NEW Registered Agent and/or NEW Registered C	Office addre	FILED
	3627 NW 15 ST		35 to
	<u>NEW</u> Registered Office Address:		<i>2</i> ~ o
	MIAMI FL	33125	
the cha agent w was/we the arti	imited liability company is not organized under the lawinge or changes are made, the Florida street address of tivill be identical. Or, in the case of a Florida limited liabilities authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	s of the St he register bility com the limite	red office and the business office of the registered pany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in bility company.
-	ure of a perilber or authorized representative of a member		Printed or typed name of signee
provisi he obli o mere	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address, I have the property of this charge.	ee to act in performand for in Che ereby conf	n this capacity. I further agree to comply with the uce of my duties, and I am Jamiliar with and accept apter 605, F.S. Or, if this document is being filed firm that the limited liability company has been
Signatur	re of Registered Agent		

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