

L17000157751

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

(Business Entity Name)

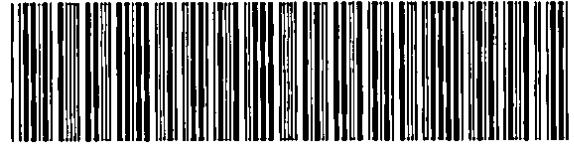
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BRUCE
SEP 18 2018

COVER LETTER

TO: Registration Section
Division of Corporations

7017 3380 0000 2585 4773

SUBJECT: Excelsior Portfolio, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Celia C Geng, CPA

Name of Person

Celia C Geng & Co., LLC

Firm/Company

4128 College Poin Blvd

Address

Flushing, NY 11355

City/State and Zip Code

efile@gengcpa.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Celia C Geng, CPA

at (718)

888-1898

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 amount:

☐ \$25 Filing Fee

☒ \$55 Filing Fee & Certified Copy

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**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. Name of the limited liability company: Excelsior Portfolio, LLC

2. (a) 445 Broad Hollow Road Suite 25 (b) 445 Broad Hollow Road Suite 25

Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)

Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)

Melville, NY 11747

Melville, NY 11747

July 24, 2017

L17000157751

3. Date of filing/registration in Florida

4. Document number

5. (a) Hang Guo

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

2129 Sable Wood Drive

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Anna, FL 75409

(b) Hang guo

Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Office Address:

13501 NE 20th Court

North Miami, FL 33181

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Hang Guo

Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

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

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TALLAHASSEE FLORIDA