

L17000240 050

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

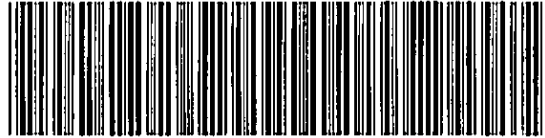
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2019 DEC 16 PM 2:09

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Amend

JAN 16 2020

I ALBRITTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ALCHANG INVESTMENT 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:

JONES HSIEN

Name of Person

DELTA INTERNATIONAL ENTERPRISES, INC.

Firm/Company

16599 SW 54 CT.

Address

MIRAMAR FL 33029

City/State and Zip Code

JONESHSIEN@COMCAST.NET

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

For further information concerning this matter, please call:

JONES HSIEN

Name of Person

at (305) 479-8269

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 following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

ALCHANG INVESTMENT LLC

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager


AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	SHIH-CHI CHANG	16599 S.W. 54 CT.	<input checked="" type="checkbox"/> Add
		MIRAMAR FL 33027	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	JONES HSIEN	16599 S.W. 54 CT.	<input checked="" type="checkbox"/> Add
		MIRAMAR FL 33027	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.


 Signature of a member or authorized representative of a member

TING CHANG
 Typed or printed name of signee

Filing Fee: \$25.00