## L170000261686

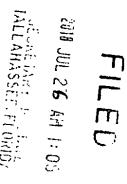
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F. 16. E.

## COVER LETTER

TO: Registration Section Division of Corporations		
Kingstar USA LLC SUBJECT:		
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:	
Ruping Yuan		
Name of Person		
Kingstar USA LLC		
Firm/Company		
1034 S Jeaga Drive		
Address		
Jupiter , FL33458		
City/State and Zip Code	<u></u>	
nancyyuan03@yahoo.com		
E-mail address: (to be used for future a	innual report notification)	
For further information concerning this matt	er, please call:	
Ruping Yuan	561 6305555	
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 followi	лg amount:	
<b>№</b> \$25 Filing Fee	☐ \$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.

L N	ame of the limited liability company: Kingstar USA	LLC	·
2. (a)	1034 S Jeaga Drive, Jupiter, FL33458	(b)	1034 S Jeaga Drive, Jupiter, FL33458
_, (,	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	12/26/2017		17000261686
3.	Date of filing/registration in Florida	- <del>-</del>	Document number
	Legaling Corporate Service Inc	ч.	Document humber
5. (a)	Registered Agent and Registered Office shown on the records of	the Florida Di	ent of State:
	5237 Summerlin Commons. Suite 400, Fort		epi. W. Mac
	Registered Office Address (MUST BE FLORIDA STREET)		
	, F1.	33907	ALLAHASSE
(b)	Ruping Yuan		ASS
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office addre	· · · · · · · · · · · · · · · · · · ·
	1034 S Jeaga Drive, Jupiter,		
	NEW Registered Office Address:		0)
		33458	
	, FI.		
the cha agent t was/w	limited liability company is not organized under the lay ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the registe ability composition in 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
	ture of a member or authorized representative of a member		ng Yuan
Signa	ature of a member or authorized representative of a member		Printed or typed name of signee
provis the ob to mer	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address. It is in writing of this change	ee to act in performand d for in Cha hereby conj	this capacity. I further agree to comply with the ce of my duties, and I am familiar with and accep apter 605, F.S. Or, if this document is being filed firm that the limited liability company has been

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