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PICK-UP	☐ WAIT	MAIL		
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Certified Copies	_ Certificates of	Status		
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Special Instructions to	Filing Officer:			

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JUN 10 2003 J. HARRIS

## **COVER LETTER**

TO:	Registration Section Division of Corporations					
SUBJ	ECT: SINO-USA EDUCATION TO	CULTURE	EXCHANGE	CENTER,	146	
	Name o	f Limited Liabi	lity Company			
Dear S	ir or Madam:					
The en	closed Registered Agent/Registered Office	Change and fee	(s) are submitted for f	ling.		
Please	return all correspondence concerning this n	natter to the foll	owing:			
Jak	TNAE KILLION					
<u> </u>	Name of Person					
SINC	9-USA EDUCATION CULTURE Firm/Company	EXCHANO	GE CENTER, L	10		
<u>310</u>	8 S. SANTA BARBARA A	BL VD				
STE	105 # 168 , CAPE CORAL City/State and Zip Code	J 339	4			
<del></del>	joanne Killion @ hoomai	l. wn	. ,			
t,	Agail address: (to be used for future annual	report notificat	ion)			
For fu	ther information concerning this matter, plo	ease call:				
	JOANNE KILLION	at (	680.887.	2		
	Name of Person	Α	rea Code & Daytime	Telephone Number		
	STREET/COURIER ADDRESS:	MAII	ING ADDRESS:			
	Registration Section Registration Section					
	Division of Corporations	Division of Corporations				
	Clifton Building	P.O. Box 6327				
	2661 Executive Center Circle Tallahassee, Florida 32301	Tallah	assee, Florida 32314			
	Enclosed is a check for the following an	ount:				
	☑ \$25 Filing Fee	□ \$55 F	iling Fee & Certified	Сору		

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.

	•	7			70.
I. Na	me of the limited liability company: SNO-UH E	DUCATION CL	WYRE EXC	HANGE C	EN/EX, LLC
2. (a)	32/ SE 23rd Terrace, Cape Cord	(b) 3108 S	SANTA D	BARBARH	BLYO
	Principal office address of limited liability company:		ailing address of lin	•	
	(Note: MUST BE STREET ADDRESS)		(Note: MAY BE P	7	
	CAPO CORAL	STE 1	05 #168	CAPE	CORAL
	FL 33990		FL 339.	14	
	23 MAY, 2108		000 128		
<ol> <li>(a)</li> </ol>	Date of filing/registration in Florida United States Cor Poration  /E/AL ZOOM - CHEYENHO N/OSE	Agents, In	Document numb	er	
J. (U)	Registered Agent and Registered Office shown on the records of the		/		
	13362 WINDING OAK COL	UDT A			
				r-5	
	<u> </u>	<u>DRESSI</u>			4.14.2 Y-
	TAMPA			<u>بر جرح</u>	1 }
	. FL	33612			F.
	1	· · · · · · · · · · · · · · · · · · ·			Fair.
(b)	JOHNHE KILLION				\$ ***
(0)	Enter name of NEW Registered Agent and/or NEW Registered Of	ffice address:		ရွှေ့ 😭	•
				्ट- 뜨	
	3168 S. SANTA BARBARA	BIUD		‡#	
	NEW Registered Office Address:				
	STE 105 # 168,				
	CAPE CORPL ,FL	33914			
If the li	mited liability company is not organized under the laws	of the State of Flor	ida it ie harabu	confirmed the	ut ofter
	nge or changes/are made, the Florida street address of the				
agent w	ill be identical. Or, in the case of a Florida limited liabi	ility company, it is l	hereby confirme	ed that the cha	nge(s)
was/we	re authorized by an affirmative vote of the members of teles of organization or the operating agreement of the lin	he limited liability of	company or as o	otherwise prov	vided in
inc arti	(A) VI VII VILLETI V V	\ 1 \			
	VIVI WATANVAA			LIDN	
	ure of a member or authorized representative of a member		Printed or typed nar		
provision the obli to mere	oy accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pe gations of my position as registered agent as provided for reflect a change in the registered office address. I her it is writing of this diange!	to act in this capac erformance of my du or in Chapter 605, i reby confirm that th	city. I further as ities, and I am J F.S. Or, if this i e limited liabili	gree to comply amiliar with a document is bo ty company ha	with the and accept eing filed as been
Signatur	e of Registered Agent				

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