## L18000278057

(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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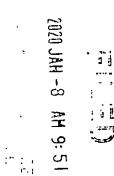


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R/W. US

## COVER LETTER

TO:	Registration Section Division of Corporations		
	The Cozy Trip LLC		
SUBJ	ECT:		
	Na	me of Limited L	iability Company
Dear S	Sir or Madam:		
The e	nclosed Registered Agent/Registered Of	fice Change and	fee(s) are submitted for filing.
Please	e return all correspondence concerning the	his matter to the	following:
Zhon	gxian Hou		
	Name of Person		<u> </u>
The	Cozy Trip LLC		
	Firm/Company		<del></del>
1007	Lake Davenport Blvd		
	Address		<del></del>
Dave	nport FL 33897		
	City/State and Zip Code		<del></del>
Houn	elson2019@gmail.com		
<del>-</del> i	E-mail address: (to be used for future an	nual report notif	Tication)
For fu	orther information concerning this matter	r, please call:	
Nels	on Hou	347	3489255
		at (	)
	Name of Person		Area Code & Daytime Telephone Number
	Mailing Address:		Street Address:
	Registration Section		Registration Section
	Division of Corporations		Division of Corporations
	P.O. Box 6327		The Centre of Tallahassee
	Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
	Enclosed is a check for the following	g amount:	
	<b>☎</b> \$25 Filing Fee	<u> </u>	55 Filing Fee & Certified Copy
INHSI	8 (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	The Cozy Trume of the limited liability company:  1007 Lake Davenport Blvd	•	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Davenport FL 33897		
	12/03/2019	— - L:	18000278057
3. 5. (a)	Date of filing/registration in Florida SUJUN LI	4.	Document number
J. (u)	Registered Agent and Registered Office shown on the records of	ept. of State:	
	Registered Office Address (MUST BE FLORIDA STREET 1904A w Colonial Dr	ADDRESS)	······································
	Orlando, Fl	32804 L	202
(b)	Zhongxian Hou		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office addr	SS: 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
	NEW Registered Office Address: 1007 Lake Davenport Blvd		——————————————————————————————————————
	Davenport	33897 L	
change agent v was/we the arti St Signal	imited liability company is not organized under the later or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited libere authorized by an affirmative vote of the members cless of organization or the operating agreement of the work of the limited by the limited by the limited limited libered limited by acceptance or authorized representative of a member by accept the appointment as registered agent and agons of all statutes relative to the proper and complete	e registered iability com of the limite imited lial SUNJU	office and the business office of the registered pany, it is hereby confirmed that the change(s) and liability company or as otherwise provided in polity company.  IN LI  Printed or typed name of signee  of this canacity. I further agree to comply with the
notif <del>jec</del>	ons of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address. I discussion of this change.  Linnspian Houge as the confermal agent was the confermal agent.	ed for in Che hereby conf	upter 603, F.S. Or, if this document is being filed irm that the limited liability company has been