

L19000113106

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

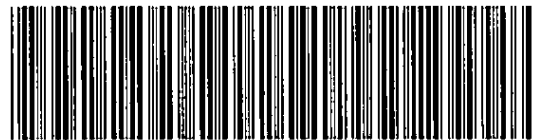
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
SALT LAKE CITY, UTAH

Y SINKER

JUL 8 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: A E CAPELLA 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:

AMY YANG

Name of Person

N/A

Firm/Company

6944 NW 10TH PL

Address

GAINESVILLE FL 32605

City/State and Zip Code

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

For further information concerning this matter, please call:

AMY YANG

at (352) 562-3288

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

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.

2. (a) See below

(b) See below

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

SAME AS PRINCIPAL OFFICE ADDRESS

4/25/2019

L19000113106

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

See below

6944 NW 10TH PL

GAINESVILLE FL 32605

(b) ALEXANDER C HAN

SAME AS ABOVE

SAME AS ABOVE

FL

x Alex H. Kim
Signature of a member or authorized representative of a member

Printed or typed name of signee

X Wally Hew
Signature of Registered Agent

INHS18 (2/14)