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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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COVER LETTER

Division of Corporations BOIN-E LLC		
SUBJECT: Name	of Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	e Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
DAYONG LUO		
Name of Person		
BOIN-E LLC		
Firm/Company		
2415 SAND LAKE RD. SUITE M		
Address		
ORLANDO FLORIDA 32809		
City/State and Zip Code		
boin-e@boin-e.com		
E-mail address: (to be used for future annua	al report notification)	
For further information concerning this matter, p	lease call:	
DAYONG LUO	at ()	
Name of Person	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 a	mount:	
■ \$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.

I. Na	une of the limited liability company: BOIN-E LLC		
2. (a)		(b)	
(- /	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	2415 Sand Lake Rd. Suite M	2415	Sand Lake Rd, Suite M
	Orlando, FL 32809	Orlan	ido, FL 32809
	03/12/2020	L20000	0079922
3.	Date of filing/registration in Florida	4.	Document number
5. (a)			
(11)	Registered Agent and Registered Office shown on the records of DAYONG LUO	of the Florida Dept. o	f State:
	Registered Office Address	F ADDRESS)	
	Orlando F	L_32839	
(b)	DAYONG LUO		202 TALL
(07	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	ed Office address.	PILE PM
	NEW Registered Office Address:		For R
	2415 Sand Lake Rd, Suite M		STATE ORIGINAL
	Orlando	T	
change agent was/we the arti Z Signa	imited liability company is not organized under the lear changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the members cles of organization or the operating agreement of the DAGONG LAO three of a member or authorized representative of a member by accept the appointment as registered agent and agons of all statutes relative to the proper and completing ignations of my position as registered agent as providing the reflect a change in the registered office address,	te registered officiability company of the limited liability by DAYONG DAYONG wree to act in this	te and the business office of the registered (it is hereby confirmed that the change(s) ability company or as otherwise provided in (company). LUO Printed or typed name of signee (capacity. I further agree to comply with the

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

Signature of Registered Agent