## L20000214963

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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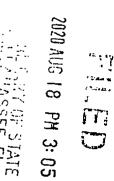
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08/18/20--01022--012



10/20

## COVER LETTER

TO: Registration Section Division of Corporations	•
SUBJECT: WALDZ LLC	
	nited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Chan	ge and fec(s) are submitted for filing.
Please return all correspondence concerning this matter	to the following:
Cha hao yeh chen Name of Person	
Name of Person	
Firm/Company	
	523
301 Altara Ave Apt Address	
Addiess	
Coval Gables, FL 33146	
City/State and Zip Code	
cha-hao@live.com	
E-mail address: (to be used for future annual repor	t notification)
For further information concerning this matter, please ca	all:
cha hao yeh chen	619 755-7378
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 Tallahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
Tananassee, T.C. 52514	Tallahassee, FL 32303
Enclosed is a check for the following amount	:
\$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
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.

I. Na	me of the limited liability company: WALDZ	LLC				
	301 Altura Ave Apt 532	(b)	301 Altera Ave Apt 532			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(*/	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	Coral Gables FL 33146		Coral Gubies FL 33146			
	<u>8</u> 8711 /2020		[20000214963			
3.	Date of filing/registration in Florida	4.	Document number			
5. (a)	Dongyan Zhou					
, ,	Registered Agent and Registered Office shown on the records of to	he Florida Dept	t. of State:			
	Registered Office Address (MUST BE FLORIDA STREET A	DDRFSS)	<del></del>			
	301 Altara Ave, A					
	Corol Gobles FL		<del></del>			
(b) _	cha hao yeh chen					
I	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office address	;			
	301 Altura Ave Apr 5	32				
	NEW Registered Office Address:					
	coral Gables .FL	33146				
change of agent with was/were	mited liability company is not organized under the law or changes are made, the Florida street address of the r ill be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of les of organization or the operating agreement of the l	registered of oility compar `the limited	fice and the business office of the registered ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in			
			Printed or typed name of signee			
	re of a member or authorized representative of a member					
provisioi the oblig to merely	e accept the appointment as registered agent and agre ns of all statutes relative to the proper and complete p tations of my position as registered agent as provided w reflect a change in the registered office address, I ha in writing of this change.	e to act in the erformance for in Chapter eby confire	is capacity. I further agree to comply with the of my duties, and I am familiar with and accept ter 605. F.S. Or, if this document is being filed in that the limited liability company has been			

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

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	301 Altura Ave Apt 532	_ (b) _	301	Altara	Ave	Apt 532	
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	Coral Gables FL 33146		(ora	l Gabi	es F	L 33146	
	08/11 /2020		[200	0021496	53		
3.	Date of filing/registration in Florida	4.	Do	cument num	ber		
5. (a)	Program Zhou Registered Agent and Registered Office shown on the records of the						
	Registered Agent and Registered Office shown on the records of the Registered Office Address (MUST BE FLORIDA STREET AL		ept. of State:		·:	2020 AUG	
	301 Altara Ave, Ax				2:51		
	Coral Gables .FL				SSVE JO AU	H 8	
(b)	cha hao yeh chen				STAT	ا ا ا ا ا ا ا	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	office addre	<u> 1885</u> :		t.i	φ	
	301 Altura Ave Apt 5	32					
	NEW Registered Office Address:		<del></del>				
	coral Gables ,FL	3314	6				
change agent w was/we the arti-	imited liability company is not organized under the laws or changes are made, the Florida street address of the revill be identical. Or, in the case of a Florida limited liabore authorized by an affirmative vote of the members of cles of organization or the operating agreement of the lineare of a member or authorized representative of a member	egistered of ility compaths the limite mited liab	office and the pany, it is he diability conjuity compan	te business or reby confirm on pany or as ny.  ha hao inted or typed n	ffice of the ned that the sotherwise yeh	e registered e change(s) e provided in  Chen	
provision the oblication mere notified	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete perigations of my position as registered agent as provided for reflect a change in the registered office address, I held in writing of this change.	e to act in erformanc for in Cha reby conf	this capacit we of my duti upter 605, F, irm that the	y. I further i es, and I am S. Or, if this limited liabi	igree to co Jamiliar v Aocumen lity compa	omply with the vith and accept t is being filed ny has been	
Signatur	re of Registered Agent						