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ja plialso

COVER LETTER

TO:	Registration Section Division of Corporations						
SUBJI	Fat Choy 4210 LLC						
	Name of Limited Liability Company						
Dear S	ir or Madam:						
The en	closed Registered Agent/Registered O	ffice Change and	fee(s) are submitted for filing.				
Please	return all correspondence concerning t	his matter to the f	following:				
	Name of Person						
Grand	Monarch LLC						
	Firm/Company		_				
15751	SHERIDAN ST. #204						
	Address						
FT. LA	UDERĐALE, FL 33331						
•	City/State and Zip Code						
atminy	estments@outlook.com						
I	-mail address: (to be used for future ar	nual report notifi	cation)				
For fur	ther information concerning this matte	r, please call:					
Shawn	Tawil	954 at (804-7317)				
	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 followin	g amount:					
	■ \$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	ame of the limited liability company: Fat Choy 4210 LI	LC			
2. (a)			(b)		
~. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)		
	15751 SHERIDAN ST. #204		15751 SHE	CRIDAN ST. #204	
	FT. LAUDERDALE, FL 33331		FT. LAUD	ERDALE, FL 33331	
	08/18/2020		L200002534	87	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	Shawn Tawil				
J. (a)	Registered Agent and Registered Office shown on the records of	the Flori	ida Dept. of State	:	
	Registered Office Address (MUST BE FLORIDA STREET.	ADDRE.		202 3-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	
	15751 SHERIDAN ST. #204			1020 SEP	
	Ft Lauderdale , FL	33331		主力 上 []	
(b)	Grand Monarch LLC			Y OF SI	
` '	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office :	address:	E. FL STATE Tr: tr	
	NEW Registered Office Address:				
	15751 SHERIDAN ST. #204				
	Ft Lauderdale . FL	33331			
change agent v was/we the arti	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liar ere authorized by an affirmative vote of the members of cless of organization or the operating agreement of the ture of a member or authorized representative of a member	registe ability of the li limited —	ered office and company, it is mited liability Hiability com	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany. Printed or typed name of signee	
попуш	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address, I have been address, I have been address, I have been address, I have been address.	ree to a perfori d for in hereby	ct in this capa nance of my a Chapter 605, confirm that t	city. I further agree to comply with the luties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been	
Signatu	re of Registered Agent				