## L21000292234

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
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(Document Number)				
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## **COVER LETTER**

INHS18 (2/14)

	gistration Section vision of Corporations				
SUBJECT	3084 N ASHLAND LANE LLC				
Sebucer	Name of Limited Liability Company				
Dear Sir or	Madam:				
The enclose	ed Registered Agent/Registered	Office Change ar	nd fee(s) are submitted for filing.		
Please retur	n all correspondence concernin	g this matter to th	e following:		
Danqing Li					
	Name of Person		<del></del>		
	Firm/Company				
1331 Zureiq	CT				
	Address				
Clermont, F	L 34714				
	City/State and Zip Co	de			
mayuwci@g	gmail.com				
E-mai	l address: (to be used for future	annual report not	ification)		
For further	information concerning this ma	itter, please call:			
YUWEI MA	A	917 at (	741-3560		
	Name of Person		Area Code & Daytime Telephone Number		
Re; Div P.C	gistration Section vision of Corporations  D. Box 6327  Hahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
En	closed is a check for the follow	ving 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. Fiorida 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: 3084 N ASHL	AND LANE LL. <del></del>	(; 
2. (a)	3084 N ASHLAND LANE		334 Zureig CT
	Principal office address of limited liability company: (Note: MUST BE STREET (DDRESS))		Mailing address of limited hability company  (Note: MAY BE POST OFFICE BOX)
	KISSIMMEE, FL 34741	(	Termont, FL 34714
	06 23/2021	1.21	1000292234
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	MA, YUWEI		
·	Registered Agent and Registered Office shown on the records a 3084 N ASHLAND LANE	of the Florida Dep	or of State:
	Registered Office Address (MUST BE FLORID ( STREE	T (DDRESS)	
	KISSIMMEE		
(b)	Li, Danqing		SECUL TO
	Enter name of NEW Registered Agent and or NEW Register	ed Office addres	<b>温</b> 27
	1331 Zureiq Ct		SET P
	NFW Registered Office Address:		MI JIL 23 PH 5: 45 SECRETARY OF STALLAHASSEL FILE
	Clermont F	PL 34714	
agent w was/we	imited liability company is not organized under the last or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited lare authorized by an affirmative vote of the members cles of organization or the operating agreement of the	ic registered of liability compa of the limited	Tice and the business office of the registered my, it is hereby confirmed that the change(s)
Signat	ure of a memory or authorized representative of a member	YUWEI	
I herei provisie the obli to mere notified	by accept the appointment as registered agent and as ons of all statutes relative to the proper and completing ations of my position as registered agent as providely reflect a change in the registered office address. If it writing of this change.	gree to act in ti e performance led for in Chap I hereby confir	Printed or typed name of signee has 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 hability company has been