## 122000021102

(Requestor's Name)							
(Address)							
(Addi	ress)						
(City/	State/Zip/Phon	e #)					
PICK-UP	☐ WAIT	MAIL.					
(Busi	iness Entity Na	me)					
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

Office Use Only



700385981927

04/18/22--01039--005 \*\*25.00

2022 APR 18 PM 2: 3

cf willows

## COVER LETTER

Division of Corporations	
SUBJECT: Lasting Vibrancy	LLC mited Liability Company
Dear Sir or Madam.	
The enclosed Registered Agent/Registered Office Char	nge and fee(s) are submitted for filing.
Please return all correspondence concerning this matte	
Klin-hsuan Hsieh Name of Person	
Lasting V. brancy L1	<u>C</u>
Firm/Company	
1032 E Brandon Blud	48799
Address	<del></del>
Brandon, Fl. 335H	<del></del>
City/State and Zip Code	
tr. gloria tisieh @ gmail. a	ort notification)
For further information concerning this matter, please	call:
Min-hsuary Hsieh at (	954 328 2230 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 amou	nt:
\$ \$25 Lilling Lec # 235	□ \$55 Filing Lee & 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: Lastin	ig Vi	biancy	LLC		
2. (a)		V	U			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)		•	mited liability com	•
	1630 7 Brandon Blud #8	999	1032	E Bro	nden Blrc	1 4899
	Brandon 71, 33511					
	Jan 4 2022		上云	220000	a 11 02	
3	Date of filing/registration in Florida	4.	De	eument numb	ner	
5. (a)						
	Registered Agent and Registered Office shown on the records of	of the Florida I	Dept, of State			
	Registered Office Address (MUST BE FLORIDA STREET	T ADDRESS)	<del></del>		<i>c</i> -	
	4809 SW 120th AVZ				<u> </u>	202
	1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	-			· ·	F., 2022 AFR 18
	Coper City	: <sub>1</sub> 3.	333 o		:	نيثي كت
	/ /				٠٠ ج	 'C
(b)					•	~
	Unter name of NEW Registered Agent and/or NEW Registers	ed Office add	FESS:		; <sub>(1,1</sub> ,	
	Virtual Post Solutions, Inc.				7:3:	
	NEW Registered Office Address:				7	
	1032 E Brandon Blvd.					
	Brandon	3351	1			
		٠١,				
-chang -agent -was/w	limited liability company is not organized under the la c or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	he registered liability cor s of the limi	d office and the npany, it is he ted liability compa ability compa	ne husiness of creby confirm ompany or as ny.	hee of the regis ed that the chan otherwise prov	tered
	Ala Flan Plais		Alin-A	is day /	151E/	
Segna	ature of a member or authorized representative of a member		į'ı	inted or typed is	ame of signee	
the ob- to mer	hy accept the appointment as registered agent and a ions of all statutes relative to the proper and complet digations of my position as registered agent as provided reflect a change in the registered office address, and in writing of this change.	gree to act le pertorma led for in C I hereby co	in this capaci, nce of my du hapter 605, F ntirm that the	ty. I turther a ies, and I am S. Or, if this limited liabil	igree to comply familiar with ai document is be ity company ha	with the id accept ing filed is been
	US San 2 urg/of Registered Agent					