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COVER LETTER

	stration Section sion of Corporations			
SUBJECT:	ADU RAINBOW LLC			
301311.01.	Name of Limited Liability Company			
Dear Sir or i	Madam:			
The enclosed	d Registered Agent/Registered C	office Change and	fee(s) are submitted for filing.	
Please returi	rall correspondence concerning	this matter to the	following:	
ANRONG Ć	HEN			
	Name of Person		- 	
ADU RAINI	BOW LEC		<u></u>	
	Firm/Company			
1653 Sanibel	[]r		··	
	Address			
Davenport F	L 33896			
	City/State and Zip Cod	c .		
-	777@gmail.com			
E-mai	l address: (to be used for future	annual report noti	fication)	
For further	information concerning this mat	ter, please call:		
Anrong Che	n	626 at (383-994-	
	Name of Person	```	Area Code & Daytime Telephone Number	
M	niling Address:		Street Address:	
	gistration Section		Registration Section	
	vision of Corporations		Division of Corporations	
). Box 6327		The Centre of Tallahassee	
Ta	Hahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Eo	closed is a check for the follow	ring amount:		
î	\$25 Filing Fee	۵	\$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.

	1653 Sanibel Dr. Davenport, FL 33896	(b) 165.	3 Sanibel Dr, Davenport, FL 33896
(a) _.	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	((/)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		1 2200	00495465
	12/17/2022		Document number
	Date of filing/registration in Florida UNITED STATES CORPORATION AGENTS, INC.	4.	170 cunent manoci
(a)	Registered Agent and Registered Office shown on the records of	the Florida Dept.	of State.
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	
	5575 S. SEMORAN BLVD.SUITE 36		
	ORLANDO, FI	32822	
dsi	Anrong Chen		22
(15)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	l Office address	. 7. 2
	NEW Registered Office Address:		; ω
	1653 Sanibel Dr		
	Davenport , FI	33896	
nange gent as/w ne art Sign	imited fiability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members icles of organization or the operating agreement of the many change of a member of	e registered of ability compa of the limited liabil	he and the business office of the legistered iny, it is hereby confirmed that the change(s) hability company or as otherwise provided in ity company. Then Printed or typed name of signee
ovis e ob mei	by accept the appointment as registered agent and ag ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. I d'in writing of this change.	ree to act in it performance ed for in Chap hereby confir	of my duties, and I am familiar with and acc ner 605, F.S. Or, if this document is being fil on that the limited liability company has been