## m06000003133

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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: THE INYANGCHUNG SUPE (Name of Limited	ER, LLC Liability Company)
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office C	Change and fee(s) are submitted for filing.
Please return all correspondence concerning this ma	atter to the following:
ANNETTE FINCH (Name of Person)	<del></del>
CORPORATE DIRECT, INC. (Firm/Company)	TALL/
2248 MERIDIAN BLVD. STE H	E L 2001 NAY 2 SECRETAR ALLAHASS
(Address)	
MINDEN, NV 89423 (City/State and Zip Code)	P 12: 40  OF STATE FLORIDA
For further information concerning this matter, plea	se call:
ANNETTE FINCH at (7 (Name of Person)	75 ) 782-1302 (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount	unt:
<b>✓</b> \$25 Filing Fee	\$55 Filing Fee & Certified Copy

## Â.

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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.

agent, or oom, in the state of Prortati.	
1. The name of the limited liability company is:	THE INYANGCHUNG SUPER LLC
2. The mailing address of the limited liability co	ompany is: POST OFFICE BOX 2869
60 EAST SIMPSON AVE. JAC	CKSON, WY 83001
06/01/2006	M0600003133
3. Date of filing/registration in Florida	4. Document number
Florida Department of State:  TEN BRINK, DE  1238 VILLAGE LA	Name AKES BOULEVARD UNIT #3-10 Address
6. The name and address of the new registered ag	, State and Zip
1037 GREYSTONI Florida street address SARASOTA	Name P
confirmed that after the change or changes are m and the business office of the registered agent will liability company, it is hereby confirmed that the of the members of the limited liability company or the operating agreement of the limited liability was company or the operating agreement of the limited liability (Signature of a member or authorized representative of a member of a member of signee)	under the laws of the State of Florida, it is hereby nade, the Florida street address of the registered office will be identical. Or, in the case of a Florida limited e change(s) was/were authorized by an affirmative vote or as otherwise provided in the articles of organization by company.  Language Chung Superannuation  Language Chung Superannuation  Justion Fund  Manage  The to the proper and complete performance of my duties, may position as registered agent as provided for in filed to merely reflect a change in the registered office its company has been notified in writing of this change.

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