

PD8000036517

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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MAIL

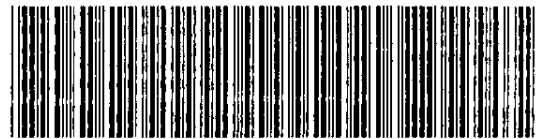
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
11 MAR 18 AM 10:24

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@ 3/21/11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: AC Tampa Bay, Inc
Name of Corporation

DOCUMENT NUMBER: P08000036517

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Linna Shi
Name of Contact Person

AC Tampa Bay, Inc
Firm/Company

11601 4th street N., unit 5107
Address

ST. Petersburg, FL 33716
City/State and Zip Code

benmeng8@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ben Meng at (813) 298-8101
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: AC Tampa Bay, Inc
2. The principal office address: 11601 4th street N., unit 5107
St. Petersburg, FL 33716
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 04/09/2008 Document number: P08000036517

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

xianbin meng, resigned

4710 28th street N

Saint petersburg, FL 33714

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Linna Shi

11601 4th Street N., Unit 5107

P.O. Box NOT acceptable

St. Petersburg, FL 33716

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Linna Shi

Signature of an officer or director

Linna Shi

Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Linna Shi

Signature of Registered Agent

3/14/2011

Date

If signing on behalf of an entity:

Linna Shi

Typed or Printed Name

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314