

P14000001748

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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STATE  
SECRETARY OF STATE  
DIVISION OF CORPORATION  
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C. LEWIS  
AUG 4 2014  
EXAMINER

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** YING YING SPA, INC  
(Name of Corporation)

**DOCUMENT NUMBER:** P14000001748

The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

WOODY McLANE  
(Name of Person)

\_\_\_\_\_  
(Name of Firm/Company)

4915 NW 53 ST.  
(Address)

TAMARAC, FL 33319  
(City/State and Zip Code)

For further information concerning this matter, please call:

WOODY McLANE at (954) 806-6211  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for ~~\$87.50~~ for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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

**Mailing Address:**  
Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

**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: YING YING SPA, INC.
2. The principal office address: 5327 N. STATE ROAD 7  
TAMARAC, FL 33319
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 1-7-2014 Document number: P14022001748

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)

YAN MUELLER (Resigned)  
8170 MADISON LAKES Circle N.  
DAVIE, FL 33328

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

SHAORYU CHEN  
5327 N. STATE ROAD 7  
P.O. Box NOT acceptable  
TAMARAC, FL 33319

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RECEIVED  
DIVISION OF CORPORATIONS  
FLORIDA DEPARTMENT OF STATE

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.

Shaoryu Chen  
Signature of an officer or director

SHAORYU CHEN  
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.

Shaoryu Chen  
Signature of Registered Agent

July 14, 2014  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
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  
CR2E045 (03/12)