

P140000074338

(Requestor's Name)

(Address)

(Address)

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(Business Entity Name)

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** **BAMBOO CHI INC.**

\_\_\_\_\_  
Name of Corporation

**DOCUMENT NUMBER:** \_\_\_\_\_

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:

**TAO ZOU**

\_\_\_\_\_  
Name of Contact Person

\_\_\_\_\_  
Firm/Company

**39-01 MAIN ST. SUITE 403**

\_\_\_\_\_  
Address

**FLUSHING, NY 11354**

\_\_\_\_\_  
City/State and Zip Code

**CHOCO@PRUDENTCPA.COM**

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**TAO ZOU**

\_\_\_\_\_  
Name of Contact Person

at ( **415** ) **816-2532**

\_\_\_\_\_  
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 FL  
in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: BAMBOO CHI INC.
2. The principal office address: 8001 SOUTH ORANGE BLOSSOM TRAIL. RM 684  
ORLANDO, FL 32809
3. The mailing address (if different): 39-01 MAIN ST. SUITE 403  
FLUSHING, NY 11354
4. Date of incorporation/qualification: 09/08/2014 Document number: P14000074338
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)

TAO ZOU  
961 NW FRESCO WAY APT 204  
JENSEN BEACH, FL 34957

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

TAO ZOU  
8001 SOUTH ORANGE BLOSSOM TRAIL RM 684  
P.O. Box NOT acceptable  
ORLANDO, FL 32809

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.

Tao Zou  
Signature of an officer or director

TAO ZOU / PRESIDENT  
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.*

\_\_\_\_\_  
Signature of Registered Agent

\_\_\_\_\_  
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  
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