P15000088760

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
J. HORNE	
OCT - 5 2023	
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TO: Amendment Section Division of Corporations

SUBJECT:_____FELICITY HC FANG CPA PA

Name of Corporation

DOCUMENT NUMBER: P15000088760 ·

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:

FELICITY FANG

Name of Contact Person

FELICITY HC.FANG CPA PA

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Firm/Company

2875 NE 191st ST, STE 500

Address

Aventura, FL 33180

City/State and Zip Code

fang@ffangcpa.com

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

For further information concerning this matter, please call:

FELICITY FANG	305 728-2484
	at ()
Name of Contact Person	Area Code & Daytime Telephone Number

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

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

Street Address:

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

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 <u>FLORIDA</u> in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation:	FELICITY HC FANG CPA PA
2. The principal office address:	2875 NE 191st ST, STE 500, AVENTURA, FL 33180
 3. The mailing address (if different 4. Data of incorporation/aualification):
5. The name and street address of t Florida Department of State: (If	he current registered agent and registered office on file with the resigned, enter resigned)
	CITY FANG 5 NE 191st ST. STE 500
AVE	ENTURA, FL 33180
6. The name and street address of t (if changed):	he new registered agent (if changed) and /or registered office
FELICITY FANG	
6830 16th Terrace	
St Petersburg, FL I	
The street address of its registered as changed will be identical.	I office and the street address of the business office of its re stered ag t .
Such change was authorized by re authorized by the board of the co	resolution duly adopted by its board of directors or by an efficer s rporation has been notified in writing of the change.
Signature of an officer of direction	Printed or typed name and title
I further agree to comply with the of my duties, and I am familiar wi document is being filed merely to corporation has been notified in v	is registered agent and agree to act in this capacity. provisions of all statutes relative to the proper and complete performance ith and accept the obligation of my position as registered agent. Or, if this reflect a change in the registered office address. Thereby confirm that the writing of this change.
Signature of Registered Age If signing on behalf of an entity:	9/15/2023 Date
FELICITY FANG	
Typed or Printed Name	* * * F1LING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (04/13)