From:

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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850) 617-6380

Prom:

Account Name : COGENCY GLOBAL, INC.

Addount Number : 12000000008 Phone : (800)221-0102 Fax Number : (800)944-6607

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REGISTERED AGENT CHANGE FENG SHUI STYLE HOLDINGS, INC.

Certificate of Status	0
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Electronic Filing Menu Corporate Filing Menu

Help

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

1. Na	ame of the limited liability company: (2005) 100 100 100 100 100 100 100 100 100 10		OIO DEBUIADOT LLD			
2. (a)	Principal office address of limited liability company:	- · (b)	Mailing address of limited liability company:			
	(Note: MUST BE STREET APDRESS)		(Note: MAY BE POST OFFICE BOX)			
	411	<u> </u>	200 Liberty Street, 27th Floor			
	ORLANDO, FL 32835		New York, NY 10281			
	02/08/2016		P16000012856			
3.	Date of filing/registration in Florida	4.	Document number			
5. (a)	Corporate Creations Network Inc					
	Registered Agent and Registered Office shown on the records of the	c Florida Dep	t. of State:			
	11380 Prosperity Farms Road #22	1E				
	Registered Office Address MUST BE FLORIDA STREET AD	DRESS				
	Palm Beach Gardens , FL_	33410	2018 JAN -3			
√ (b) _	COGENCY GLOBAL INC.					
1	Enter name of NEW Registered Agent and/or NEW Registered O	Olce address:	$\dot{\omega}$			
	115 North Calhoun Street, Suite 4		~			
	NEW Registered Office Address:					
•	Tallahassee , FL_	32301				
the chan agent wi was/wen	nited liability company is not organized under the laws ge or changes are made, the Florida street address of the ill be identical. Or, in the case of a Florida limited liabile authorized by an affirmative vote of the members of the least organization or the operating agreement of the lim	e registered lity compar he limited l	d office and the business office of the registered ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in			
Signatur	re of a member of authorized representative of a member		Printed or typed name of signee			
l hereby rovision he oblig o merely	vaccept the appointment as registered agent and agree ins of all statutes relative to the proper and complete per ations of my position as registered agent as provided for vreflect a change in the registered office address, I her in writing of this change.		is capacity. I further agree to comply with the of my duties, and I am familiar with and accept er 605, F.S. Or, if this document is being filed in that the limited liability company has been			
	of Registered Agent AS 57 SECRET					
TÉDUTA.	OF ACRISHITED ARCHITECTURE	12 Z.J				

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