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COVER LETTER

Division of Corporations
SUBJECT: JSInternational Inc. Name of Corporation
DOCUMENT NUMBER: 018000007375
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:
Liping Si Name of Contact Person TSInternational Firm/Company
5355 SW 150th Terr
miramar FL 33027 Gity/State and ZipiCode
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Liping Si at (305), 6249274 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.

Street Address: Amendment Section

Clifton Building

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Mailing Address: Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

CR2E045 (03/12)

TO:

Amendment Section

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: TS International Inc.
2. The principal office address: 5355 SW 150th Terr, miramar FL 33027
3. The mailing address (if different): 5355 SW 150th Terr, miramar FL 3302
4. Date of incorporation/qualification: 01 22 20 8 Document number: P18000007375
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)
James Zou
5409 NW 163rd Street
miami gardens FL 33014
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Liping Si
5355 SW 150th terr P.O. Box NOT acceptable
miramar FL 33027
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.
Liping Si President Signature of an officer or director Liping Si President
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 02 12 2018 Date
If signing on behalf of an entity:
Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

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