

L25000180872

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

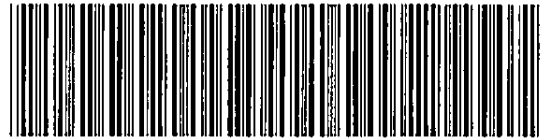
(Business Entity Name)

(Document Number)

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2025 JUN 6 PM 4:25

cf 7/28/2025

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Yasmine Brooks RE LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Yasmine Brooks

Name of Person

Yasmine Brooks RE LLC

Firm/Company

11824 Easthampton Drive

Address

Tampa/ FL 33626

City/State and Zip Code

yasminenadaf@gmail.com

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

For further information concerning this matter, please call:

Yasmine Brooks

904

719-3548

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

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

Return Address:

Yasmine Brooks
11824 Easthampton Drive
Tampa, FL 33626
Daytime Phone: (904) 719-3548

To:

Florida Department of State
Division of Corporations
Tallahassee, FL

Date: May 28, 2025

Subject: Amendment to Change LLC Name

To Whom It May Concern,

I am submitting an amendment to change the name of my limited liability company registered in the State of Florida.

Current LLC Name: Yasmine Brooks RE LLC
Proposed New Name: Yasmine Brooks LLC
Document Number: L25000180872

Please find the appropriate amendment form enclosed. I kindly request that the name of the LLC be updated in your records.

For any questions, feel free to contact me at (904) 719-3548.

Thank you for your time and assistance.

Sincerely,
Yasmine Brooks

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This amendment is submitted to amend the following:

Yasmine Brooks LLC

Enter new principal offices address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

Civ.

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

If Changing Registered Agent, Signature of New Registered Agent

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Signature of a member or authorized representative of a member

Yasmine N Brooks

Typed or printed name of signee