I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under				
oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and				
that my name appears above, or on an attachment with all other like empowered.				
SIGNATURE: DAWN MARIE TOMI INSON	OFFICE MANAGER	02/08/2019		

SIGNATURE: DAWN MARIE TOMLINSON

I

Electronic Signature of Signing Authorized Person(s) Detail

THORIZED REPRESENTATIVE	Title	OFFICE MANAGER
RICH, TODD W	Name	TOMLINSON, DAWN MARIE
34 BAHIA VISTA STREET	Address	3434 BAHIA VISTA STREET
RASOTA FL 34239	City-State-Zip:	SARASOTA FL 34239

# Electronic Signature of Registered Agent

### . . . . . .

Authorized Person(s) Detail :					
Title	AUTHORIZED REPRESENTATIVE	Title	OFFICE MANAGER		
Name	EMRICH, TODD W	Name	TOMLINSON, DAWN MARIE		
Address	3434 BAHIA VISTA STREET	Address	3434 BAHIA VISTA STREET		
City-State-Zip:	SARASOTA FL 34239	City-State-Zip:	SARASOTA FL 34239		

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

### Name and Address of Current Registered Agent:

EMRICH, TODD WALKER

3434 BAHIA VISTA STREET SARASOTA, FL 34239 US

DOCUMENT# L14000030932

Entity Name: YODER'S VILLAGE, LLC

3434 BAHIA VISTA STREET SARASOTA, FL 34239

### **Current Mailing Address:**

3434 BAHIA VISTA STREET SARASOTA, FL 34239

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

# FEI Number: 46-5300526

SIGNATURE: TODD WALKER EMRICH

## **Current Principal Place of Business:**

Certificate of Status Desired: Yes

FILED Feb 08, 2019 Secretary of State 8392440795CC

> 02/08/2019 Date

> > Date

OFFICE MANAGER