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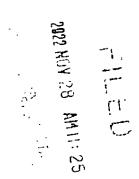
(Requestor's Name)	
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PICK-UP WAIT MAIL	
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A. RAMSEY FEB 2 1 2023

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: YOMTOBIAN FAMILY LLLP					
Name of Limited Partnership or Limited Liability Limited Partnership					
DOCUMENT NUMBER: A21000000205					
The enclosed Statement of Change of Registered C fee(s) are submitted for filing.	office and/or Registered Agent and				
Please return all correspondence concerning this m	atter to:				
Carlos F. Lopez, Esq.					
Contact Person					
Hollander, Goode & Lopez, PLLC					
Firm/Company					
314 S. Federal Highway Address					
Address					
Dania Beach, FL 33004					
City, State and Zip Code					
shali@californo.co					
E-mail address: (to be used for future annual report not	fication)				
For further information concerning this matter, ple	asa salli				
For further information concerning this matter, pie	ase can.				
Carlos F. Lopez at (95	4				
Name of Contact Person Ar	ca Code and Daytime Telephone Number				
Enclosed is a \$35.00 check made payable to the FI	orida Department of State.				
Mailing Address:	Street Address:				
Registration Section	Registration Section				
Division of Corporations	Division of Corporations				
P.O. Box 6327	The Centre of Tallahassee				
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810				
	Tallahassee, FL 32303				

LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115. Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

L YOMTOBI	AN FAMILY LLLP			
1	Name of Limited Partnership or L	imited Liability Lir	nited Partners	hip
2.05/07/2021		3. A21	05 nent number	
Date of fili	ng/registration in Florida		nent number	
4. The name of the Department of State	registered agent and the registere	d office address as	shown on the	records of the Florida
	WFP LAW PA			
	N	ame		. 24
	1250 S PINE ISLAT	ND RD STE	200	
	Ad	dress		. <u> </u>
Plantation, FL 33324				2 HOY 28
	City, St	nte and Zip		
5. The name and F	lorida street address of the new re	gistered agent and/	or office:	OY 28 ATTIVE
	HOLLANDER, GOO	DDE & LOPE	Z, PLLC	· .
	N	ame		
	314 S. Federal High	iway		
	Florida street address (P.O. Box not accep	otable)	
	Dania Beach	FL:	33004	
	City, St	ate and Zip		
6. Such change(s)	is/are effective when filed by the	Florida Department	t of State.	
Word C	lomtobian			
Morad C Signature of General	al Partner	_		
comply with the pro	appointment as registered agent wisions of all statutes relative to eith an accept the obligations of the Lopes	the proper and com	iplete perform	I further agree to ance of my duties.
Signature of Regist	ered Agent			
Filing Fee:	\$35.00			

Certified Copy (optional): \$52.50