

F 93000001694

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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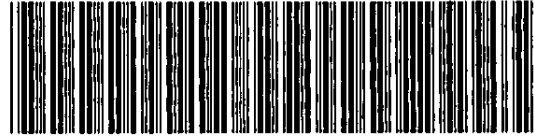
(Business Entity Name)

(Document Number)

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13 APR -9 AM 11:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APR 16 2013  
T. ROBERTS

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Yankee Development Corp.  
Name of Corporation

**DOCUMENT NUMBER:** F930000011094

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:

Paul Doucette  
Name of Contact Person

Yankee Development Corp.  
Firm/Company

1 Christies Landing  
Address

Newport, RI 02840  
City/State and Zip Code

PDOUCETTE@ATLANTICSTARS.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Paul Doucette at ( 401 ) 849-2033  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**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 \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Yankee Development Corp.

2. The principal office address: 1 Christies Landing Newport, RI 02840

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 4/10/1993 Document number: F9300000110914

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)

Mark Bardorff  
3e Washington Square  
Newport, FL 02840

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Jose A. Scavedra  
5975 Sunset Dr. Ste #504  
P.O. Box NOT acceptable  
Miami, FL 33143

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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.

[Signature]  
Signature of an officer or director

PAUL DOVCEK, TREASURER  
Printed or typed name and title

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]  
Signature of Registered Agent

5/3/2013  
Date

If signing on behalf of an entity:

dan of jose A Scavedra, President  
Typed or Printed Name

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