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(Requestor's Name)				
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PICK-UP WAIT MAIL				
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(Business Entity Name)				
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B. BOSTICK
FEB 1 8 2013
EXAMINER

COVER LETTER .

TO: Registration Section Division of Corporations		
SUBJECT: Yoyodine Motions,		
Name of	Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.	
Please return all correspondence concerning	g this matter to the following:	
Kathy Kuchta		
Name of Person		
Dharma Group, LC		
Firm/Company		
14 S. Swinton Avenue	TALL	
Address	FEB 15 AM 11: 47	
	(S) - 5	general d
Delray Beach, FL 33444	100 m	Į"I
City/State and Zip Code	- AMILY LORD	•
		- J
kathy@goodwater.com	>	-
E-mail address: (to be used for future annual report	notification)	
For further information concerning this mat	ter, please call:	
Kathy Kuchta	at (561) 276-0055	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301		
Enclosed is a check for the following	ng amount:	
\$25 Filing Fee	□ \$55 Filing Fee & Certified Copy	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	Na	me of the limited liability company:	Yoyodine Motions, LLC
2.	(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	1180 Seminole Trail, Ste. 155 Charlottesville, VA 22901
	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1180 Seminole Trail, Ste. 155 Charlottesville, VA 22901
		4/30/2003	L03000015628
3.	Dat	te of filing/registration in Florida 4.	Document number
5.	(a)	Registered Agent and Registered Office shown on the	e records of the Florida Dept. of State:
		Registered Agent:	Sandi Morick
		Registered Office Address:	615 S L Street Lake Worth, FL 33460
		_	TEB TI
	(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u>	
		NEW Registered Agent:	Kathy Kuchta 🚆 🚆
		NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	14 S. Swinton Avenue ::
		-	Delray Beach ,FL 33444
co an lia the the	nfirr d the bilit e me e ope	imited liability company is not organized under the lay med that after the change or changes are made, the Flore business office of the registered agent will be identically company, it is hereby confirmed that the change(s) with the change of the limited liability company or as otherwise erating agreement of the limited liability company.	rida street address of the registered office
Pri	Kin nted o	mberly Goodyear, Manager or typed name of signee	
	herei mply d I a iapte dres	by accept the appointment as registered agent and agree with the provisions of all statutes relative to the proposition familiar with and accept the obligations of my positions of S. Or, if this document is being filed to mere so I hereby confirm that the limited liability company hereby the of Registered Agent	ee to act in this capacity. I further agree to er and complete performance of my duties, tion as registered agent as provided for in ly reflect a change in the registered office has been notified in writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00