L06000100453

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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200196261162

NAME CHANGE DUE TO MARRIAGE
MR KEE

CENTRAL FLORIDA REALTY,CO.

From the office of Mohamed Ali Yche and Sakina Yche
3745 South Highway 27 Suite A Clermont, FL 34711
Office: 352-989-4903 Fax: 407-209-3835 Email: aliyche@yahoo.com

FACSIMILE TRANSMITTAL SHEET

TO: Lee Acker	**FAX:** 1-850-245-6897
RE: Amendment : Name change Request on MAY LLC.	**TEL:** 1-850-245-6050
Total Pages: 8	**DATE:** 03/10/2011

To Whom It May Concern:

As per my conversation with Maribel Rivera, enclosed is: my marriage license as well as the my new driver license, reflecting my new name " Sakina Yche" and naturalization certificate.

Please amend your records on our company: "MAY LLC and Central Florida Realty, CO.", Florida document number: L06000100453, EIN # 20-5716247 to reflect the change. If you need more information, please do not hesitate to contact me at: 954-376-0146 or 407-968-2328 or email: sakinayche@yahoo.com or aliyche@yahoo.com.

Thank you and look forward to your reply.

Sincerely,

Mohamed Ali Yche and Sakina Yche
Central Florida Realty, CO.
Cel: 407-968-2328
Office: 352-989-4903
Fax: 407-209-3835
Email: Sakinayche@yahoo.com or aliyche@yahoo.com

Department of Health • Vital Statistics

(STATE FILE NUMBER)

STATE OF FLORIDA
MARRIAGE RECORD

TYPE IN UPPER CASE
USE BLACK INK

This license not valid unless seal of Clerk, Circuit or County Court, appears thereon.

LARRY WHALEY 1P
OSCEOLA COUNTY, FLORIDA
CLERK OF CIRCUIT COURT

CL 2000106199 ML 5/675
ACL Date 07/26/2000 Time 15:33:07

00-63, 790
(APPLICATION NUMBER)

APPLICATION TO MARRY

1. GROOM'S NAME (First, Middle, Last)			2. DATE OF BIRTH (Month, Day, Year)
MOHAMED ALI YCHE			JULY. 13, 1966
3A. RESIDENCE - CITY, TOWN OR LOCATION	3B. COUNTY	3C. STATE	4. BIRTHPLACE (State or Foreign Country)
KISSIMMEE	OSCEOLA	FLORIDA	MOROCCO
6A. BRIDE'S NAME (FIRST, MIDDLE, LAST)		5b. MAIDEN SURNAME (If different)	6. DATE OF BIRTH (Month, Day, Year)
SAKINA (NMN) MERNISSI		SAME	NOV. 3, 1973
7A. RESIDENCE-CITY, TOWN, OR LOCATION	7b. COUNTY	7c. STATE	8. BIRTHPLACE (State or Foreign Country)
KISSIMMEE	OSCEOLA	FLORIDA	MOROCCO

WE THE APPLICANTS NAMED IN THIS CERTIFICATE, EACH FOR HIMSELF OR HERSELF, STATE THAT THE INFORMATION PROVIDED ON THIS RECORD IS CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF, THAT NO LEGAL OBJECTION TO THE MARRIAGE OR THE ISSUANCE OF A LICENSE TO AUTHORIZE THE SAME IS KNOWN TO US AND HEREBY APPLY FOR LICENSE TO MARRY.

9. SIGNATURE OF GROOM (Sign full name using black ink)	10. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE)
▶	JULY. 20, 2000
11. TITLE OF OFFICIAL	12. SIGNATURE OF OFFICIAL (Use black ink)
DEPUTY CLERK	▶
13. SIGNATURE OF BRIDE (Sign full name using black ink)	14. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE)
▶	JULY. 20, 2000
15. TITLE OF OFFICIAL	16. SIGNATURE OF OFFICIAL (Use black ink)
DEPUTY CLERK	▶

LICENSE TO MARRY

AUTHORIZATION AND LICENSE IS HEREBY GIVEN TO ANY PERSON DULY AUTHORIZED BY THE LAWS OF THE STATE OF FLORIDA TO PERFORM A MARRIAGE CEREMONY WITHIN THE STATE OF FLORIDA AND TO SOLEMNIZE THE MARRIAGE OF THE ABOVE NAMED PERSONS. THIS LICENSE MUST BE USED ON OR AFTER THE EFFECTIVE DATE AND ON OR BEFORE THE EXPIRATION DATE IN THE STATE OF FLORIDA IN ORDER TO BE RECORDED AND VALID

17. COUNTY ISSUING LICENSE	18. DATE LICENSE ISSUED	18a. DATE LICENSE EFFECTIVE	19. EXPIRATION DATE
OSCEOLA	JULY. 20, 2000	JULY. 23, 2000	SEPT. 23, 2

20a. SIGNATURE OF COURT CLERK OR JUDGE	20b. TITLE	20c. BY D.C.
▶ Larry W Kelley	CLERK OF THE CIRCUIT COURT	@

CERTIFICATE OF MARRIAGE

I HEREBY CERTIFY THAT THE ABOVE NAMED GROOM AND BRIDE WERE JOINED BY ME IN MARRIAGE IN ACCORDANCE WITH THE LAWS OF THE STATE OF FLORIDA

21. DATE OF MARRIAGE (Month, Day, Year)	22. CITY, TOWN, OR LOCATION OF MARRIAGE
JULY 26, 2000	OSCEOLA COUNTY COURTHOUSE, KISSIMMEE

23a. SIGNATURE OF PERSON PERFORMING CEREMONY (Use black ink)	23c. ADDRESS (Of person performing ceremony)
▶ Anna B. Clay	17 S. VERNON AVE, KISS, FL 347
23b. NAME AND TITLE OF PERSON PERFORMING CEREMONY (Or notary stamp) ANNA B. CLAY DEPUTY CLERK/MARRIAGE ASSOCIATE	24. SIGNATURE OF WITNESS TO CEREMONY (Use black ink)
	25. SIGNATURE OF WITNESS TO CEREMONY (Use black ink) ▶

INFORMATION BELOW FOR USE BY VITAL STATISTICS ONLY - NOT TO BE RECORDED

26. SOCIAL SECURITY NUMBER	27. RACE	28. WERE YOU EVER PREVIOUSLY MARRIED?	IF ANSWER IS YES TO ITEM 28, THEN COMPLETE ITEMS 28a, 28b, and 28c		
			28a. NO. OF THIS MARRIAGE	28b. LAST MARRIAGE ENDED BY (DEATH, DIVORCE OR ANNULMENT)	28c. DATE LAST MARRIAGE ENDED (Mo., Day, Year)

STATE OF FLORIDA, COUNTY OF OSCEOLA I HEREBY CERTIFY that the above and foregoing is a true copy of the Replica of the original document recorded in the public records.

MALCOM THOMPSON, Clerk Circuit Court

Dated 2-23-11 By D.C.