10000115948

(Requestor's Name)	
(Address)	
(Address)	
;	
(Oix-IOx->- 77 - 10)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	

Special Instructions to Filing Officer:

L. SELLERS

FEB 2 9 2008

EXAMINER

Office Use Only



200116662192

· ANDERSON H

02/04/08--01042--017 **25.00

SECRETARY OF STATE

FILED

COVER LETTER

Division of Corporations	·	
SUBJECT: Y & A Enterprises LLC		
(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 this matter to the following:		
Yave I Donaire (Name of Person)		
(Name of Ferance)	.≠•	
Y & A Enterprise LLC===L060000115948		
(Firm/Company)	**************************************	
5226 Sidesaddle Drive		
(Address)		
laska anvilla Flavida 20057		
Jacksonville Florida 32257 (City/State and Zip Code)		
(Oil) Blate and 2-p coat,		
For further information concerning this matter, plea	ase call:	
Tot father mormation concerning this matter, pre-	use cuii.	
Yave I Donaireat (9	904 \ \ 484-6302	
(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 Tallahassee, Florida 32314	
2661 Executive Center Circle Tallahassee, Florida 32301	ramanassee, Fronta 32314	
Enclosed is a check for the following amount:		
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	
/		

INHS18 (8/05)



February 5, 2008

YAVE I. DONAIRE 5226 SIDESADDLE DRIVE JACKSONVILLE, FL 32257

SUBJECT: Y & A ENTERPRISES, LLC

Ref. Number: L06000115948

We have received your document for Y & A ENTERPRISES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

No form was received with your coverletter and check. Please complete the enclosed form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Leslie Sellers Regulatory Specialist II

Letter Number: 308A00007618

Y & A ENTERPRISES, LLC

5226 Sidesaddle Dr. Jacksonville, FL 32257 (904) 484-6302

February 18, 2008

Leslie Sellers Regulatory Specialist II Florida Department of State Division of Corporation

Subject: Y& A ENTERPRISES, LLC

Ref Number: L06000115948

I am returning my cover letter and my form of "Statement of Change of Registered Office or Registered agent or Both For Limited Liability Company." The \$25 dollar fee was sent with the first cover letter. Please see attach letter # 308A00007618.

Thank you

Yave/I. Donayre.

Owner

SECRETARY OF STATE

FILED

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. The name of the limited liability company is: 2. The mailing address of the limited liability company is: 5226 3. Date of filing/registration in Florida 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State Mailaddress! Post Office Boy 450605 MIAMI . FJ 33245-0605 6. The name and address of the new registered agent and/or office: Name Florida street address (P.O. Box NOT acceptable) If the limited liability company is not organized under the laws of the State of Florida Tris hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the imited liability company or as otherwise provided in the articles of organization or the operation of the limited liability company. agreement of the limited liability company. or the operating member or authorized representative of a member) 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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

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

(Signature of Registered Agent)