## L08000033752

(Re	equestor's Name)				
(Ac	ldress)				
(Ac	ldress)				
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
ertified Copies Certificates of Status					
Special Instructions to Filing Officer:					
		;			

Office Use Only



700335134287

10/15/19--01011--026 \*\*25.00

2019 OCT 15 AH 10: 4

MON OS AND

## COVER LETTER

	ion of Corporations		i,
SUBJECT:	YAUGA J		LLC
		Name of Limite	d Liability Company
Dear Sir or M	adam:		
The enclosed	Registered Agent/Registe	ered Office Change	and fee(s) are submitted for filing.
Please return	all correspondence conce	rning this matter to	the following:
Tat	Name of Person	nES on	
Valis	Firm/Compan		<del></del>
328	CRADON J Address	Bulevaus	Surte 208
KE	City/State and Zip		33149
E-mail a	Herrocospado address: (to be used for fi	Erre Cor	notification)
For further in	formation concerning thi	s matter, please call	:
Taki	Name of Person	at (_ <del>-}</del>	86) 351-3171  Area Code & Daytime Telephone Number
ern	EET/COURIER ADDR	FCC.	MAILING ADDRESS:
	stration Section	rayo.	Registration Section
	tion of Corporations		Division of Corporations
	on Building		P.O. Box 6327
2661	Executive Center Circle hassee, Florida 32301		Tallahassee, Florida 32314
Encl	osed is a check for the f	ollowing amount:	
71-45	) 'S Filing Fee	ſ	3 \$55 Filing Fee & Certified Copy

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOF LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability compansubmits 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: VAUSA	Jewels	s lle		
2. (a)		_ (b)			
2. (a) <u>.</u>	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)		
	1820 NW BZnd Are. Hrami FC 33176				
	Hrani Fi 33176				
3.	Date of filing/registration in Florida	4.	Document number		
٥.		٦.	Document number		
5. <b>(a)</b>	Registered Agent and Registered Office shown on the records of the	ha Ulasida Dant, af Si	otas		
	Registered Agent and Registered Office shown on the records of the	не гібінда глері. От зі	ate.		
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)	——————————————————————————————————————	2019 OCT	
	<del> </del>			80 변	
	1820 NW 82nd Ale. Miam FL 3 ,FL	2200	_ARASSLEAF		
	Michael C 3 ,FL	22/26	<u> </u>	A	
(b)			<u>:-</u>	AM 10: 4	
(0)	Enter name of NEW Registered Agent and/or NEW Registered (	Office address:	<del></del>	4.7	
	Acert (some)				
	NEW Registered Office Address:				
	328 CRANDON Boulevae	o Suit	<u>=</u> Zæ8		
	KEY BEGORFIE .FL	33140	<u>``</u>		
the char agent w was/we	mited liability company is not organized under the law nge or changes are made, the Florida street address of twill be identical or, in the ease of a Florida limited liabere authorized by an aftermative vote of the members of cles of organization or the operating agreement of the l	the registered off bility company, i f the limited liabi	ice and the business of it is hereby confirmed lity company or as of	office of the registered that the change(s)	
Signat	ure of a member or authorized representative of a member		Printed or typed name	of signee	
provisie the obli to mere	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided By reflect a change in the registered office address, I h I in writing of this change.	ee to act in this co performance of m I for in Chapter 6 ereby confirm the	spacity. I further agr v duties, and I am far 05, F.S. Or, if this do ut the limited liability	ee to comply with the niliar with and accep ocument is being filed company has been	

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

Signature of Registered Agent