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(Requestor's Name)		
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(Address)		
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(City/State/Zip/Phone #)	—	
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Business Entity Name)		
(Decourage Number)		
(Document Number)		
Certified Copies Certificates of Status	—	
Special Instructions to Filing Officer:		
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C. LEWIS

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EXAMINER

COVER LETTER

Registration Section **Division of Corporations** YGO PARTNERS LLC SUBJECT: 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: Jancy Reyes Name of Person Paracorp Incorporated Firm/Company PO BOX 160568 Address Sacramento, CA 95816 City/State and Zip Code skapetas@kvbpartners.com

E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Jancy Reyes 800 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 amount:

\$55 Filing Fee & Certified Copy

\$25 Filing Fee

SYATEMENT 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.

Name of the limited liability company:	YGO PARTNERS LLC	
2. (a) Principal office address of limited liability company	:	
(Note: MUST BE STREET ADDRESS)	LECE TO	
(b) Mailing address of limited liability company:	SSEE TO	
(Note: MAY BE POST OFFICE BOX)		
6-2-09	409000054278	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:		
Registered Agent:	PARACORP INCORPORATED	
Registered Office Address:	2804 GATEWAY OAKS DRIVE 200 SACRAMENTO FL 95833 US	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> : <u>NEW Registered Agent:</u> <u>PARACORP INCORPORATED</u>		
NEW Registered Office Address:	236 East 6th Avenue	
(MUST BE FLORIDA STREET ADDRESS)	Tallahassee,FL32303	
If the limited liability company is not organized under the laws of the State of Florida, it is 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 limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member		
Printed or typed name of signee		
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pro and I am familiar with and accept the obligations of my pos Chapter 608, F.S. Or, if this document is being filed to men address, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to sper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office whas been notified in writing of this change.	

Signature of Registered Agent