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2016 APR -1 PK 2: 25

K.SALY EXAMMER

APR -4

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Y & Propert's LU 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:
Yaniv Subug Name of Person
Jac Properties LU Firm/Company
1/331 W 6 St. Bla Address
Dlantution D 33325 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Yaniv Suboy at (646) 651-5667 Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clother Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:
\$25 Filing Fee \$ Certified Copy

INHS18 (2/14)

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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. N	lame of the limited liability company:
2. (a)	161 01 01 1111 00
(w)	Principal office address of limited liability company: Mailing address of limited liability company:
	(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)
	151 N. NOB Hill RD suit 151 N. NOB HILL RD Sui
	Plantation, PL 33324 220 Plantation, FL 33324 220
	3/29/16 L09000055879
3.	Date of filing/registration in Florida 4. Document number
5. (a)NYcity Living LLC
`	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	11331 NV 6 St.
	1/331 NV 6 St. Plantation , FL 33325
(b)	and the line of the second sec
` '	Enter name of NEW Registered Agent and/or NEW Registered Office address:
	26 Company of the com
	NEW Registered Office Address:
	151 N. NOG Hill AD Shit 220
	Plantation At ,FL 33324
If the	limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after
the ch	lange or changes are made, the Florida street address of the registered office and the business office of the registered
was/w	will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in
the ar	ticles of organization or the operating agreement of the limited liability company.
	ature of a member or authorized representative of a member Variv Subus Printed or typed name of signee Printed or typed name of signee
Sign	ature of a member or authorized representative of a member Printed or typed name of signee
provis the ob to me	eby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the sions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept ligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed rely reflect a change in the registered office address, I hereby confirm that the limited liability company has been ed in writing of this change.
Signat	ure-of-Registered Agent
التناعيب	mily de profession en referir