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APR 22 2010

EXAMINER



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COVER LETTER

TO: Registration Section Division of Corporations	;	
SUBJECT: YOKOSO, LLC		
Name of Limi	ted 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:		
the second secon	miller to the following,	
JUAN FRANCO Name of Person		
Name of Person		
VALPARAISO, LLC		
Firm/Company		
PO BOX 1179		
Address		
HALLANDALE EL 22000		
HALLANDALE, FL, 33008 City/State and Zip Code		
Chylonale and Zip Code		
JUAN@4LATINPROJECT.COM E-mail address: (to be used for future annual report notification)		
13 mail decress, (to be used for father annual report nonthealthr)		
For further information concerning this matter, please call:		
JUAN FRANCO at a	(579) A500460	
Name of Person at (573 <u>4528462</u> Area Code & Daytime Telephone Number	
	rica evac to bay time vereprione retining	
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:		
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	
· · · · · · · · · · · · · · · · · · ·		

. 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 hability 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:	YOKOSO, LLC
2. (a) Principal office address of limited liability company	4577 NOB HILL ROAD
(Note: MUST BE STREET ADDRESS)	SUNRISE, FL, 33351
(b) Mailing address of limited liability company:	PO BOX 1179
(<u>Note: MAY BE POST OFFICE BOX</u>)	HALLANDALE, FL, 33008
06/19/2009	L09000059555
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on the	he records of the Florida Dept. of State:
Registered Agent:	GARY SINGER
	4577 NOB HILL ROAD SUNRISE, FL, 33351
(b) Enter name of NEW Registered Agent and/or NEW	
NEW Registered Agent:	VALPARAISO, LLC
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	4577 NOB HILL ROAD SUNRISE, FL, 33351 .FL
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Flo and the business office of the registered agent will be identicability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as otherwor the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	aws of the State of Florida, it is hereby orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote vise provided in the articles of organization
Printed or typed name of signee I hereby accept the appointment as registered agent and age comply with the provisions of all statutes relative to the project and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to meraddress. I hereby confirm that the limited liability company	ree to act in this capacity. I further agree to per and complete performance of my duties, ition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.

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