Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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(((H110001610313)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: LEGALZOOM.COM INC. Account Name

Account Number : 120010000062 Phone : (323)962-8600 Fax Number

: (323)962-3889

L. SELLERS

JUN 2 0 2011

EXAMINER

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address			

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN YUMMY YOGA LLC

Certificate of Status Certified Copy Ð 03 Page Count \$25.00 Estimated Charge

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

Division of Corporations				
SUBJECT: Yummy Yoga 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:				
Ani Muradian				
Name of Person				
Legalzoom.com, inc.				
Firm Company				
100 W Broadway Suite 100				
Address				
Glendale, CA 91210				
City State and Zip Code				
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akruckus@att.net E-mail address: (to be used for future annual report notification)				
,				
For further information concerning this matter, please call:				
Ciaire Gutierrez at (323) 962-8600				
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:				
\$25 Filing Fee & Certified Copy				

INHS18 (05 08)

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 liability company submits the following statement in or agent, or both, in the State of Florida.	3.508. Florida Statutes, the undersigned limited der to change its registered office or registered					
1. Name of the limited liability company:	YUMMY YOGA LLC					
. (a) Principal office address of limited liability company:						
(Note: MUST BE STREET ADDRESS)	205 Gnaried Oaks Or Ponte Vedra Beach, Florida 32082					
(b) Mailing address of limited liability company:						
(Note: MAY BE POST OFFICE BOX)	205 Gnaried Oaks Dr Ponte Vedra Beach, Florida 32082					
06/24/2010	L10000067423					
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:	UNITED STATES CORPORATION AGENTS, INC.					
Registered Office Address;	13302 WINDING OAKS BLVD.					
	TAMPA FL 33612 US					
(b) Enter name of <u>NEW Registered Agent</u> and/or N	EW Registered Office address:					
NEW Registered Agent:	Karen Rucks					
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	205 Gnarled Oaks Dr					
(MUST BE PINKINA STREET ADDRESS)	Ponts Vedra Beach F1_32082					
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.						
Karen A Rucks	— DM .RS					
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address. I hereby confirminat the limited liability company	_					
Regulative of Regulated Agent	Karen Rucks					
Division of Corporations, P.O. Box 6327, Tailahassee, FL 32314 FILING FEE: \$25.00						