

L10000119863

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

(Business Entity Name)

L1-119863

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Cullen NOV 18 2011

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: YAM EXPORT & IMPORT 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:

Angelica Y. Aguilar

Name of Person

YAM Export & Import LLC

Firm/Company

9737 NW 41 Street, Suite 125

Address

Doral, Florida 33178

City/State and Zip Code

yam17usa@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Angelica Aguilar

Name of Person

at (786) 2638548

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center 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

☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 2, 2011

ANELICA Y. AGUILAR
9737 NW 41 STREET
SUITE 125
DORAL, FL 33178

SUBJECT: YAM EXPORT & IMPORT LLC
Ref. Number: L10000119863

We have received your document for YAM EXPORT & IMPORT LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan
Regulatory Specialist II

Letter Number: 311A00024924

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 liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: YAM Export & Import LLC

2. (a) Principal office address of limited liability company: _____

(Note: MUST BE STREET ADDRESS)

9737 NW 41 Street, Suite 125
Doral, Florida 33178

(b) Mailing address of limited liability company: _____

(Note: MAY BE POST OFFICE BOX)

9737 NW 41 Street, Suite 125
Doral, Florida 33178

November 18, 2010

L10000119863

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 Boulevard
A
Tampa, Florida 33688

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent: Angelica Y. Aguilar

NEW Registered Office Address:
(MUST BE FLORIDA STREET ADDRESS) 9737 NW 41 Street, Suite 125
Doral, FL 33178

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

Angelica Y. Aguilar

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00