L11000119094

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SECRETARY OF SIAIL

AUG 1 4 2013

MOTSMAN J.

August 8,2013

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: YUBUY 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:

Terrence Ayala, Esq.

Name of Persor

Terrence Ayala, PL

Firm/Company

1101 Brickell Ave., S. Twr 8th Flr

Address

Miami FL 33131

City/State and Zip Code

tcaplaw@gmail.com

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

For further information concerning this matter, please call:

Terrence Ayala

_{at} 786 529-8209

Name of Person

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



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.

3 - 3		
1. Name of the limited liability company: YUBUY LLC		
2. (a) Principal office address of limited liability com	manus EE SE 6th Street Suite 3503	
(Note: MUST BE STREET ADDRESS)	Miami FL 33131	
(NOTE TO BE OF REAL TRADERESS)		
(b) Mailing address of limited liability company:	1101 Brickell Ave.	
(Note: MAY BE POST OFFICE BOX)	South Tower, 8th Floor	
	Miami FL 33131	
08/08/2013	L11000119094	
3. Date of filing/registration in Florida	4. Document number	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
5. (a) Registered Agent and Registered Office shown	on the records of the Florid	la Dept. of State:
Registered Agent:	Terrence Ayala, Esq.	
Registered Office Address:	175 SW 7th Street, Suite 1900	
	Miami FL 33130	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> Registered Agent:	NEW Registered Office at	ddress:
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	55 SE 6th Street, Suite 3503	
MUST BE PEURIDA STREET ADDRESS	Miami	FL 33131
If the limited liability company is not organized under confirmed that after the change or changes are made, the and the business office of the registered agent will be in liability company, it is hereby confirmed that the change the members of the limited liability company or as other the operating agreement of the limited liability company.	ne Florida street address of t dentical. Or, in the case of a ge(s) was/were authorized b erwise provided in the article	the registered office a Florida limited y an affirmative vote of less of organization of SECRE AUG
Signature of a member or authorized representative of a member		ω (2) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4
Terrence C. Ayala		AP 2007 1
Printed or typed name of signee		6 85
I hereby accept the appointment as registered agent a comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of m Chapter 608, F.S. Of lift this document is being filed to address, I hereby donfirm that the limited liability com	nd agree to act in this capac e proper and complete perfo y position as registered age o merely reflect a change in pany has been notified in w	city I further horeast
Signature of Pagistared Agent /		

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