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(Requestor's Name)				
(Ad	Idress)			
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(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
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COVER LETTER

Division of	Corporations		
SUBJECT:		STMENTS LLC	
	Name of	Limited Liability Company	
Dear Sir or Madan	1:.		
The enclosed Regi	stered Agent/Registered	Office Change and fee(s) are submitted for filing.	
Please return all co	orrespondence concerning	g this matter to the following:	
su eru .		A	
VAAZI	CK DUMECIE		
7/4/ 1	CK DUMESLE Name of Person	······································	
YMJ INV	ESTMENTS LLC Firm/Company		
	Firm/Company		
10735 E	MERALD CHASE Address	DR.	
	Address		
001.440	. FI 72876	<u>.</u>	
UKLANDI	0, FL 32836 City/State and Zip Code	<u>, </u>	
, ,	,		
realty 111	be used for future annual report		
E-mail address: (to	be used for future annual report	t notification)	
For further informa	ation concerning this ma	tter, please call:	
A4	4.5.	1.00 000 0001	
MICHAEL	NEMEC e of Person	at (407) 929 - 8834 Area Code & Daytime Telephone Number	
1 (dilli-	, or r croon	,	
	OURIER ADDRESS:		
Registration Division of		Registration Section Division of Corporations	
Clifton Build	-	P.O. Box 6327	
	ive Center Circle	Tallahassee, Florida 32314	
Tallahassee,	Florida 32301		
Enclosed is	s a check for the followi	ing amount:	
\$25 Filir	1g 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.

1. Name of the limited liability company: YMJ IN	JESTMENTS	LLC
2. (a) Principal office address of limited liability company	: 107351	EMERALD CHASE DR
(Note: MUST BE STREET ADDRESS)	ORLANDO,	FL 32836
(b) Mailing address of limited liability company:	1 <u>0735 E</u>	EMERALD CHASE DR.
(Note: MAY BE POST OFFICE BOX)	ORLANDO,	FL 32836
APRIL 30, 2012 3. Date of filing/registration in Florida	L 120000	
5. (a) Registered Agent and Registered Office shown on t	he records of the Fl	orida Dept. of State:
Registered Agent:	MICHAEL	NEMEC
Registered Office Address:	5603 SOM	ERSBY RD.
· ·	WINDERMEI	RE, FL 34786
(b) Enter name of NEW Registered Agent and/or NEW	V Registered Offic	e address:
NEW Registered Agent:	MICHAEL	NEMEC
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)		TANDREWS CIR.
1,	ORLANDO	,FL <u>3283</u> 5
If the limited liability company is not organized under the laconfirmed that after the change or changes are made, the Fl and the business office of the registered agent will be identiliability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member YANICK DUMESLE Printed or typed name of signee	orida street address cal. Or, in the case was/were authorize wise provided in the	of the registered office of a Florida limited ed by an affirmative vote articles of organization 22
I hereby accept the appointment as registered agent and as comply with the provisions of all statutes relative to the provision of all statutes relative to the provision of and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to mer address, I hereby confirm that the limited liability company	gree to act in this co per and complete p ition as registered ely reflect a chang has been notified i	apacity. I further agree to erformance of my duties, agent as provided for in e in the registered office n writing of this change.