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## COVER LETTER

TO: Registration Section Division of Corporations				
Ytech Belle Glade Apartmer	nts, LLC			
Name of Limited Liability Company				
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Off	ice Change and fee(s) are submitted for filing.			
Please return all correspondence concerning th	is matter to the following:			
Alexander Lian				
. Name of Person				
Alexander Lian, P.A.				
Firm/Company				
1001 Brickell Bay Drive, Suite 1812				
Address				
Miami, FL 33131				
City/State and Zip Code				
alian@alexanderlian.com				
E-mail address: (to be used for future ann	mal report notification)			
For further information concerning this matter,	please call:			
Alexander Lian	305 381-7910			
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 605.0114 or 605.0116, 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

1. N	ame of the limited liability company:  Ytech Belle C	Glade Apa	rtments, LLC
2. (a)	Ytech Belle Glade Apartments, LLC	(b)	Ytech Belle Glade Apartments, LLC
• •	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	2000 South Maine Street		2000 South Main Street
	Belle Glade, FL 33430	E	Belle Glade, FL 33430
3.	Date of filing/registration in Florida	<del>-</del> 4.	Document number
5. (a)	Alexander Lian P.A		
J. (41)	Registered Agent and Registered Office shown on the records o	t the Florida D	ept. of State:
	Registered Office Address (MUST BE FLORIDA STREET	CANDRESS	
	2 South Biscayne Blvd, Suite 3760	善者有	
	Miami F	33131	W 26
(b)	Alexander Lian, P.A.	F. 11. 5.12  18 NOV 26 PH 12: 12	
(**)	Enter name of NEW Registered Agent and/or NEW Registere	12 N	
	NEW Registered Office Address:		
	1001 Brickell Bay Drive, Suite 1812		<u></u>
	Miami	L_33131	
the cha agent was/w	limited liability company is not organized under the lange or changes are made, the Florida street address owill be identical. Or, in the case of a Florida limited latere authorized by an affirmative vote of the members icles/of organization or the operating agreement of the	of the registe iability com of the limite	red office and the business office of the registered pany, it is hereby confirmed that the change(s) and hability company or as otherwise provided in
	Alach Lin		inder Lian
Signa	nure of a member or authorized representative of a member	<del> </del>	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 605, 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 spriting of this change.

Signature of Registered Agent