L14000021720

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Oity/Otale/2ip// Hone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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COVER LETTER

TO: Registration Section

Division of Corporations					
YARD LIFE/VANIA FAM & DICKBA	YARD LIFE/VANIA FAM & DICKBANGY WORLDWIDE CERTIFIED CLOTHI				
	Name of Limited Liability Company				
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office Change	ge and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter	to the following:				
Jamar G Johnson Sr.					
Name of Person					
Firm/Company					
207 Pennsylvania Ave.					
Address					
Clearwater FL 33755					
City/State and Zip Code					
Gerdlife & yahoo. com JE-mail address: (to be used for future annual report					
JE-mail address: (to be used for future annual report	rt notification)				
For further information concerning this matter, please c	all:				
Jamar G Johnson 72	27 280-3654				
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	☐ \$55 Filing Fee & Certified Copy				
INHS18 (2/14)					

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 Florida.

2. (a)		(b)	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	207 Pennsylvania Ave.	20	7 Pennsylvania Ave
	Clearwater FL 33755	Cle	earwater FL 33755
	2/07/2014	L14	4000021720
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	ot. of State:
	Tonya Carter		
,	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)	
•	3231 Matchlock Dr		
	Holiday , I	_{FL} _34690	7
			a e
(b)	Enter name of NEW Registered Agent and/or NEW Register	red Office address:	
			PH PH
	Jamar G Johnson Sr.		
	NEW Registered Office Address:		ഈ 5
	207 Pennsylvania Ave		
	Clearwater	_{FL} 33755	
the cha agent w was/we the arti	imited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members cless of organization or the operating agreement of the May Company of the May Comp	laws of the Stat of the registere liability compa s of the limited	ed office and the business office of the registe any, it is hereby confirmed that the change(s) liability company or as otherwise provided in lity company. Carter
-	ture of a member or authorized representative of a member	_	Printed or typed name of signee
I herel provisi the obl	by accept the appointment as registered agent and a ons of all statutes relative to the proper and comple igations of my position as registered agent as provi ify reflect a change in the registered office address,	igree to act in ti ete performance ded for in Chap I hereby confir	this capacity. I further agree to comply with t e of my duties, and I am familiar with and acc over 605, F.S. Or, if this document is being fil orm that the limited liability company has been