To. 18506176383 Page: 1/2 Fax: 8134365206 9/24/2024 08:01:36-PDT



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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : 120090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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⊢maı ı	Address:							
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LLC REGISTERED AGENT CHANGE YTE CONSULTING LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

M. SOLOMON

SEP 2 5 2024

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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.

1.	Na	me of the limited liability company: YTE Cons	sultin	g LLC			
2.	(a)	7901 4th St N	_(b) 7901 4th St N				
	(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)		failing address of limited lial (Note: MAY BE POST OF		• •
		STE 300		STE 30	0		
		St. Petersburg, FL 33702	_	St. Peter	sburg, FL 33702		
		03/21/14		L1400	0047855		
3.		Date of filing/registration in Florida	4.		Document number		
5.	(a)	OSBORNE, JOANNA					
٥.	(4)	Registered Agent and Registered Office shown on the records of the	e Florida	Dept. of State	: :		
		15301 SAM SNEAD LANE			ဟ	~	
		Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)		対応	2024 SEP	သက္ရ
		NORTH FT MYERS FL	33917		AHAS	24	elezza France
	(Ե)	Northwest Registered Agent L	LC		SEE,	PH -	
,	(0)	Enter name of NEW Registered Agent and/or NEW Registered C	Office add	<u>ress</u> :	FLATE	4: 02	
		7901 4th St N			·		
		NEW Registered Office Address:					
		STE 300					
		St. Petersburg , FL	33702				
the age was the	cha nt w s/we artic	mited liability company is not organized under the lawinge or changes are made, the Florida street address of table to the identical. Or, in the case of a Florida limited liability authorized by an affirmative vote of the members of cles of organization or the operating agreement of the law to th	he regis bility co the limi imited li	tered office mpany, it is ted liability	and the business office s hereby confirmed that y company or as otherw apany.	of the the ch ise pro	e registered ange(s)
	-	ore of a member or authorized representative of a member		, , ,	Printed or typed name of sig		
pro the to r	visio obli nere	by accept the appointment as registered agent and agreens of all statutes relative to the proper and complete pations of my position as registered agent as provided by reflect a change in the registered office address, I have the property of this change.	e to act performe for in C ereby co	in this capc ince of my c hapter 605 nfirm that t	ncity. I further agree to duties, and I am familia , F.S. Or, if this docum the limited liability com	compi r with ent is l pany h	ly with the and accept being filed as been

Signature of Registered Agent

Taylor Newman - Assistant Secretary