Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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LLC REGISTERED AGENT CHANGE YF NEW PORT RICHEY, LLC

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COVER LETTER

TO: Registration Section

INHS18 (2/14)

Division of Corporations	
SUBJECT: YF New Port Richey, LLC Name of Limit	ed 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	
Joanna Fernandez	
Name of Person	
InCorp Services, Inc.	
Firm/Company 3773 Howard Hughes Parkway Suite 500S	
Address	
Las Vegas, NV 89169-6014 City/State and Zip Code	
documents@incorp.com E-mail address: (to be used for future annual report	notification)
For further information concerning this matter, please cal	II:
Joanna Fernandez for InCorp Services, Inc. at (7	02) 866-2500 Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amount:	
ឋ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOLIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability compatibility the following statement in order to change its registered office or registered agent, or both, in the Statisforida.

	me of the limited liability company:		1350 E Newport Center Drive Suite 110
. (ถ)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(h)	Mailing address of fimited liability company (Note: MAY BE POST OFFICE BOX)
	Deerfield Beach, FL 33442		Deerfield Beach, FL 33442
	03/24/2014		L14000048904
	Date of filing/registration in Florida	4.	Document number
. (a)	STROSS, CHRISTY B		
, (a)	Registered Agent and Registered Office shown on the records	of the Horida	Dept. of State:
	111 2nd Avenue NE Suite 1402		
	Registered Office Address (MUST BE FLORIDA STREE	TADDRESS	020
	St. Petersburg	33701 FL	
(b)	InCorp Services, Inc.		
(-)	Enter name of NEW Registered Agent and/or NEW Registe	red Office add	lress: بن
	17888 67th Court North		
	NEW Registered Office Address:		
	Loxabatchee	FL33470	0
he changent was/with art	imited liability company is not organized under the ange of 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 membe icles of organization or the operating agreement of	s of the regis I liability on its of the lim	ompany, it is hereby confirmed that the change ited liability company or as otherwise provide iability company. David Mayer
	iture of a member or ulathorized representative of a member		Printed or typed name of signee
ησνις	by accept the appointment as registered agent and ions of all statutes relative to the proper and compl ligations of my position as registered agent as prov ely reflect a change in the registered office address d in writing of this phange.	idad for in t	Theorem 605 E.S. Or if this document is being

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