

L140000 92530

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

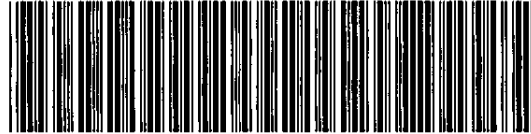
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

9/16/16 Qs

Attention: Dionne Scott

Yale Care LLC. Document Number L4000092350

I over pay the amount of 61.25 with the check # 1029 sending the wrong document form.

Can you return the amount of \$36.25 on the name of Yamileth Borges at 1091 NW 31st Ave. Pompano Beach, Fl. 33069

Thank you

Eliseo Leonardo Leon

2016 SEP 15 AM 11:12
TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Yale Care LLC.
Name of Limited 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 the following:

Eliseo Leonardo Leon

Name of Person

YALE CARE LLC

Firm/Company

1091 NW 31st Avenue, Suit C-5

Address

Pompano Beach, Fl. 33069

City/State and Zip Code

yalecarellc@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Eliseo Leonardo Leon at (954) 397-0660
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

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YALE CARE LLC

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TALLAHASSEE, FLORIDA
Zip Code

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	ELISEO LEONARDO LEON	1091 NW 31st AVE. SUIT C-5	<input checked="" type="checkbox"/> Add
		POMPANO BEACH, FL. 33069	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	YAMILETH BORGES	1091 NW 31 AVE. SUIT C-5	<input type="checkbox"/> Add
		POMPANO BEACH, FL. 33069	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 08/09/2016

Signature of a member or authorized representative of a member

Aliseo Leonardo Leon