## Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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To:

Division of Corporations

Fax Number : (830)617 6333

From:

Account Name : INCORE SERVICES INC

Account Number : 120120000007 Fhone : (702)866 2500 Fax Number : (702)866-2689

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

Email Address: Documents@incorp.com

## LLC REGISTERED AGENT CHANGE YF OLNEY, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Help

## COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: YF Olney, LLC	
Name of Limito	d 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:
Joanna Fernandez	
Name of Person	
InCorp Services, Inc.	ana. ···
Firm/Company	
3773 Howard Hughes Parkway Suite 500S	
Address	
Las Vegas, NV 89169-6014  City/State and Zip Code	
·	
E-nuil address: (to be used for future annual report to	otification)
For further information concerning this matter, please call	:
Joanna Fernandez for InCorp Services, Inc. at (70 Name of Person	2 ) 866-2600 Area Code & Daytime Telephone Number
	Street Address:
Mailing Address: Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, F1. 32314	2415 N. Monroe Street, Suite 810 Taliahassee, FL 32303
Enclosed is a check for the following amount:	
	\$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 Florida.

1. Na	me of the limited liability company: YF Olney, LLC				<u> </u>
2. (a)	1350 E. NEWPORT CENTER DRIVE SUITE 116	) (b)	1350 E. N	NEWPORT CENTE	ER DRIVE SUITE 110
z. (a) .	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(1.7		tailing address of limited (Note: MAY BE POST	
	DEERFIELD BEACH, FL 33442		DEERFIE	LD BEACH, FL 33	3442
	02/02/2015	_	L	15000019757	
3.	Date of filing/registration in Florida STROSS, CHRISTY B	4.	!	Document number	
5. (a)	Registered Agent and Registered Office shown on the records of the 111 2nd Avenue NE Suite 1402	Florida I	Jept. of State:	:	redi Cor
	Registered Office Address <u>(MUST BE FLORIDA STREET AD</u>	DRESS)			59 Fig. 5
	St. Petersburg , FL_	33701			3 41:
(b)	InCorp Services, Inc.				ب
(0)	Enter name of NEW Registered Agent and/or NEW Registered Of	ffice ndd	ress:		37
	17888 67th Court North				
	NEW Registered Office Address:				
	Loxahatchee	33470			
the char agent w was/we	inited liability company is not organized under the laws nge or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liabing authorized by an affirmative vote of the members of the of organization or the operating agreement of the line.	ie regist ility cor the limit	ered office npany, it is ted liability ability com	and the business of hereby confirmed the company or as other	hat the change(s)
	ure of a member or authorized representative of a member			Printed or typed name o	_
provisie the obli to mere notifige	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pe igations of my position as registered agent as provided f By reflect a change in the registered office address, I he I in writing of this change.	erforma for in Ci reby coi	nce of my a hapter 605, nfirm that t	nities, and I am fam F.S. Or, if this doc he limited liability c	e to comply with the iliar with and accept rument is being filed company has been
	www. Alluwulfty - Joanna Fernandez on bel	halt of I	inCorp Se	rvices, Inc.	