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To:

Division of Corporations Fax Number : (850)617-6383 From: Account Name : INCORP SERVICES INC Account Number : 120120000007 Phone : (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.

	1. 28 PH 2: 08	-	Email Address: Documents@in	Address: Documents@incorp.com			
		 •	·	LLC REGISTERED AGENT CHANGE YF RANDALLSTOWN, LLC			
<u>.</u>	2020 JUL	·: •	Certificate of Status	0	KAK		
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Corporate Filing Menu Electronic Filing Menu

Help

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: _____

YF Randallstown, 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:

Jackie DeFilippis

Name of Person

InCorp Services, Inc.

Firm/Company

3773 Howard Hughes Pkwy. - Suite 5005

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 call:

Jackie DeFilippis for InCorp Services, Inc. 800-246-2677

Name of Person

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Area Code & Daytime Telephone Number

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:

\$25 Filing Fee

□ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH F LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability comp submits the following statement in order to change its registered office or registered agent, or both, in the State of Flor

(a)	me of the limited liability company: YF Randallstov						
l. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(b)				
	1350 E. NEWPORT CENTER DRIVE, SUITE 1	0	1350 E. NEWPORT CENTER DRIVE, SUITE				
	Deerfield Beach, FL 33442	_	Deerfield Beach, FL 33442				
	04/17/2015		L150000	57546			
8.	Date of filing/registration in Florida	- 4.		Document number			
5. (a)	Christy B. Stross						
), (a,	Registered Agent and Registered Office shown on the records of	nic:					
	111 2nd Avenue NE, Suite 1402	_					
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)						
	St Petersburg , FI	,	33701	1 2023			
(1)		,	33701	1 202) 1			
(b)	St Petersburg, Fl InCorp Services, Inc. Enter name of <u>NEW Registered Agent and/or NEW Registered</u>			2021			
(b)	InCorp Services, Inc. Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office	aldress:	2020 - 5 Ali			
(b)	InCorp Services, Inc. Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office	aldress:				
(b)	InCorp Services, Inc. Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> 17888 67th Court North	Office	address:				

6/11-

David Mayer

Signature of a member of authorized representative of a member

the articles of organization or the operating agreement of the limited liability company.

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and ac the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

124 gistered Agent Signature 04,K

Jackie DeFilippis on behalf of InCorp Services, Inc.

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