

L15000083639

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

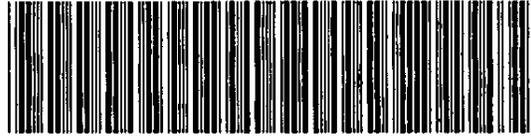
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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05/05/16--01011--017 **35.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

16 MAY 24 PM 4:05

FILED

MAY 27 2016

Y SULKER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
2015 MAY 26 AM 11:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

May 10, 2016

DAVID J PLOTKIN
PO BOX 3388
WINTER PARK, FL 32970 US

SUBJECT: YOU SHOULD RUN, LLC
Ref. Number: L15000083639

We have received your document for YOU SHOULD RUN, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 116A00009776

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: You Should Run 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:

David Plotkin
Name of Person

You Should Run LLC
Firm/Company

PO Box 3388
Address

Winter Park, FL 32790
City/State and Zip Code

dave@youshouldrun.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lynn Plotkin at (407) 274 0613
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

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. Name of the limited liability company: You Should Run LLC

2. (a) David Plotkin (b) _____

Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

PO Box 3388
Winter Park, FL 32790

3. 05/12/15
Date of filing/registration in Florida

4. L15000093639
Document number

5. (a) David J Plotkin
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*

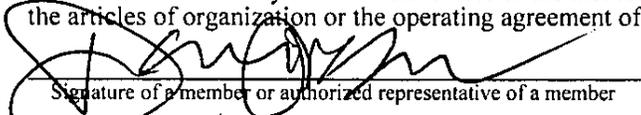
_____, FL _____

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Office Address:
537 Broadway Ave
Orlando, FL 32803

FILED
16 MAY 24 PM 4:05
TALLAHASSEE, FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.


Signature of a member or authorized representative of a member

David J. Plotkin
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 the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed 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.

Signature of Registered Agent