## LI 5000 205554

| (Requestor's Name)                      |           |
|---|-----------|
| (Address)                               | HARIO III |
| (Address)                               | 2         |
| (City/State/Zip/Phone #)                |           |
| PICK-UP WAIT MAIL                       |           |
| (Business Entity Name)                  |           |
| (Document Number)                       |           |
| Certified Copies Certificates of Status |           |
| Special Instructions to Filing Officer: |           |
|   |           |
|   | _         |
|   |           |





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FLORIDA DEPARTMENT OF STATE JAN 14 AM 8: 10

Letter Number: 021A00030421

Division of Corporations

SECATIARY L. STATE TALLAHASSEE. FL

December 16, 2021

SID HUSSAI 4100 E. BAY DR CLEARWATER, FL 33764

SUBJECT: YHYDER, LLC Ref. Number: L15000205554

We have received your document for YHYDER, 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):

The form you submitted is for a Limited Partnership, but your entity is a Limited Liability Company. Please complete and return the enclosed blank form(s).

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) 245-6050.

Irene Albritton Regulatory Specialist III

www.sunbiz.org

## **COVER LETTER**

| TO: Registration Section Division of Corporations  |  |  |
|--|--|--|
| SUBJECT: Myder, LLC Name of Limited Liability Company  |  |  |
| Dear Sir or Madam:   |  |  |
| The enclosed Registered Agent/Registered Office Chang  | ge and fee(s) are submitted for filing.  |  |
| Please return all correspondence concerning this matter  | to the following:  |  |
| Sid Hussain Name of Person   |  |  |
| Yhyder, LLC<br>Virm/Company  | <del></del>  |  |
| 4100 E. Bay Dx #B32  | <u>-</u>   |  |
| Clearunter, FL 3376 City/State and Zip Code  | 54   |  |
| Y-hyder - LLc@gmail E-mail address: (to be used for future annual report                           | t notification)  |  |
| For further information concerning this matter, please ca  | ıll:   |  |
| Sid Hussaih at (8) Name of Person  | 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:  |  |  |
| □ \$25 Filing Fee  | □ \$55 Filing Fee & Certified Copy   |  |
| INHS18 (2/14)  |  |  |

## 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.

| Name of the limited liability company:  | Yhydex, LLC  |
|---|--|
| 2. (a) 4100 E.Bay Dr. #B32  Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  | (b) 4100 E. Boy Dr. #1832  Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)   |
| Clearunter, FL 33764  |  |
| 3. Date of filing/registration in Florida   | 4. Document number   |
| 5. (a) Bhaktiben Pate   |  |
| Registered Agent and Registered Office shown on the records of  | 'the Florida Dept. of State:   |
| 2152 E.Bay Ox.  |  |
| Registered Office Address (MUST BE FLORIDA STREET   | ADDRESS)   |
|   | Ε)   |
| laxes a   | 23 <i>44</i> 1   |
|   |  |
| (b) Sid Hussain   | <del></del>  |
| Enter name of NEW Registered Agent and/or NEW Registered  | <del></del>  |
| /   |  |
| 4100 G-139x D8  | 7. TB32_ ::  |
| NEW Registered Office Address:  | ප<br>-   |
|   |  |
| <u>Cleasurgtes</u> . Fi   | 33764  |
| If the limited liability company is not organized under the la change or changes are made, the Florida street address of the agent will be identical. Or, in the case of a Florida limited li was/were authorized by an affirmative vote of the members the articles of organization or the operating agreement of the Signature of a member or authorized representative of a member | ability company, it is hereby confirmed that the change(s) of the limited liability company or as otherwise provided in  |
|   |  |
| I hereby accept the appointment as registered agent and age provisions of all statutes relative to the proper and complete the obligations of my position as registered agent as provide to merely reflect a change in the registered office address. I notified in writing of this change.   | ree to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and accept of for in Chapter 605, F.S. Or, if this document is being filed hereby confirm that the limited liability company has been |
| Signature of Registered Agent   |  |

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