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(Requestor's Name)					
,					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL.			
					
(Bu	siness Entity Nam	e)			
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Certified Copies Certificates of Status					
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COVER LETTER

ere TO:

INHS18 (2/14)

TO:	Registration Section Division of Corporations	4.	**	
SUBJ	ECT: YL VENTURES LLC	me of Limited Li	ability Company	
		ne of Emilied El	active Company	
Dear S	Sir or Madam:			
The er	nclosed Registered Agent/Registered Off	fice Change and	fee(s) are submitted for filing.	
Please	return all correspondence concerning th	nis matter to the	following:	
Jenn	a Lisitsa		<u>-</u>	
	Name of Person			
YL \	/ENTURES LLC			
	Firm/Company			
. PO !	Box 17064			
	Address			
Bev	erly Hills, CA 90209			
	City/State and Zip Code			
ilicit	sa@outlook.com			
	sa@outlook.com E-mail address: (to be used for future and	nual report notif	cation)	
	rther information concerning this matter	•	,	
ror iu	tuler information concerning this mutter	, picase carr.		
Jenna	a Lisitsa	at (305	902-8732	
	Name of Person		Area Code & Daytime Telephone Number	
	STREET/COURIER ADDRESS:		AILING ADDRESS:	
	Registration Section		gistration Section	
	Division of Corporations	Division of Corporations P.O. Box 6327		
	Clifton Building 2661 Executive Center Circle		lahassee, Florida 32314	
	Tallahassee, Florida 32301	14:	ianassee, Florida 52514	
Enclosed is a check for the following amount:				
	\$25 Filing Fee	□ \$5	5 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. N	ame of the limited liability company: YL VENT	URES LLC		
2. (a)	Jenna Lisitsa	_(h) Jenna L	(b) Jenna Lisitsa	
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	1800 E. Hallandale Beach Blvd., #85126	PO Box	85126	
	Hallandale Beach, FL 33008	Hallanda	le Beach, FL 33008	
	12/23/2015	L150002	212493	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	Thomas V Walker			
5. (u)	Registered Agent and Registered Office shown on the records of	the Florida Dept. of State	::	
	Nationwide Corporate Services Inc.			
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	- Zø	
	7950 NW 53rd St., Suite 337			
	Miami , FL	33166	AA TO BE AND A TO BE A TO BE AND A TO BE AND A TO BE AND A TO BE A	
(b)	Registered Agents Inc. Enter name of NEW Registered Agent and/or NEW Registered 3030 N. Rocky Point Dr.	Office address:	THE SHALL SHALL SEEL FLORIDA	
	NEW Registered Office Address:			
	STE 150A		-	
	Tampa ,FL	33607		
the chagent was/w the art	limited liability company is not organized under the large or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the attree of a member or authorized representative of a member eby accept the appointment as registered agent and agreement of the agreemen	f the registered office ability company, it is of the limited liability limited liability com Yevgeniya Lisi	e and the business office of the registered is hereby confirmed that the change(s) y company or as otherwise provided in apany. Itsa Printed or typed name of signee	
поције	ions of fill statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I discoverified the series of this change. Bill Havre - Assistan	performance of my old for in Chapter 605 hereby confirm that at Secretary	auties, and I am familiar with and accept , F.S. Or, if this document is being filed the limited liability company has been	
Signati	ure of Registered Agent			