

L16000148191

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17 MAY 19 PM 4:49

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: YEA HOMES LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

CAROL L. WITT

Name of Person

C/O AMELIA HASAK

Firm/Company

2917 2nd AVE N

Address

ST PETERSBURG FL 33713

City/State and Zip Code

yeafasthousebuyers@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CAROL WITT

727 871-0205
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

YEA HOMES LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 08/08/2016 and assigned
Florida document number L16000148191.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

2917 2nd AVE N

(Principal office address MUST BE A STREET ADDRESS)

ST PETERSBURG FL 33713

Enter new mailing address, if applicable:

2917 2nd AVE N

(Mailing address MAY BE A POST OFFICE BOX)

ST PETERSBURG FL 33713

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

2917 2nd AVE N

Enter Florida street address

ST PETERSBURG

City

Florida 33713

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	WITT, CAROL	2917 2nd AVE N	<input type="checkbox"/> Add
		ST PETERSBURG FL 33713	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	BROOKS, DAVIS	76 4th ST N #1010	<input type="checkbox"/> Add
		ST PETERSBURG FL 33701	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	WILLIAMS, ANDY	76 4th ST N #1010	<input type="checkbox"/> Add
		ST PETERSBURG FL 33701	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	CORNELL, MIKE	76 4th ST N #1010	<input type="checkbox"/> Add
		ST PETERSBURG FL 33701	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	DEANE, JUSTIN	2835 6th AVE S #2	<input type="checkbox"/> Add
		ST PETERSBURG FL 33712	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

(b) The 90th day after the record is filed.

Paul J. Will
Signature of a member or authorized representative of a member

Signature of a member or authorized representative of a member

CAROL L WITT

Typed or printed name of signee