## L170000 74956

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JUN 0 4 2019

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## **COVER LETTER**

TO: Registration Section Division of Corporations			
YPG LLC SUBJECT:			
	e of Limited Liability Company	-	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Offi	ice Change and fee(s) are submitted for filing.		
Please return all correspondence concerning thi	is matter to the following:		
PAUL DE BASTOS			
Name of Person	<del></del>		
Firm/Company	<del></del>		
8551 W SUNRISE BLVD SUITE 100			
Address			
PLANTATION FL 33319			
City/State and Zip Code			
PAUL@HODEBA.COM			
E-mail address: (to be used for future annual	nual report notification)		
For further information concerning this matter,	please call:	19 115	1
PAUL DE BASTOS	954 4520030		- ر خ
Name of Person	Area Code & Daytime Telephone Numb		. <u>.</u> .
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	2: 56	LATION
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.

l. Na	nme of the limited liability company:		
2. (a)	3030 N ROCKY POINTE DR STE 150 A	(b) 3030 N ROCKY POINTE DR ST	E 150 A
<b>-</b> . (u)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability co	
	TAMPA FL 33607	TAMPA FL 33607	
	04/03/2017	L17000074956	
3.	Date of filing/registration in Florida	4. Document number	
5. (a)	REGISTERED AGENTS INC.		1
J. (a)	Registered Agent and Registered Office shown on the records of	of the Florida Dept. of State:	
	7901 4TH STREET NORTHSUITE 300		
	Registered Office Address (MUST BE FLORIDA STREET	T ADDRESS)	
	ST.PETERSBURG	FL_33702	
4.5	REGISTERED AGENT SERVICES OF FLO	ORIDA LLC	
(b)	Enter name of NEW Registered Agent and/or NEW Registere		
	8551 W SUNRISE BLVD SUITE 100		
	NEW Registered Office Address:	9 出 二	75
	-		
	PLANTATION	ரு 33322	20
		FL TO	1 . (3
	imited liability company is not organized under the lange or changes are made, the Florida street address of		
agent v	will be identical. Or, in the case of a Florida limited	liability company, it is hereby confirmed that the cl	nangc(s)
	ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the		ovided in
	MY	JEAN MARC DAHAN	Ì
Signa	nure of a member or authorized tepresentative of a member	Printed or typed name of signee	
provis the ob- to mer	by accept the appointment as registered agent and a jons of all statutes relative to the proper and complet ligations of my position as registered agent as provided which is a change in the registered office address, and the change of this change.	igree to act in this capacity. I further agree to compite performance of my duties, and I am familiar with ded for in Chapter 605, F.S. Or, if this document is I hereby confirm that the limited liability company	ply with the and accep being filed has been
Signate	are of Registered Agent		

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