## 117000218742

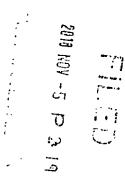
(Requestor's Name)									
(Address)									
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(City/State/Zip/Phone #)									
PICK-UP WAIT MAIL									
(Business Entity Name)									
(Document Number)									
Certified Copies Certificates of Status									
Special Instructions to Filing Officer:									

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## **COVER LETTER**

**TO:** Registration Section

Divi	ision of Corporations								
SUBJECT:	Young Sport LLC								
SOINLET.	Name of Limited Liability Company								
Dear Sir or I	Madam:								
The enclose	d Registered Agent/Registered Offic	ce Change and f	ee(s) are submitted for filing.						
Please return	n all correspondence concerning this	s matter to the fo	oflowing:						
Moises Ja	fif								
	Name of Person		_						
Young Sp	ort LLC								
	Firm/Company		_						
655 Hibiso	cus Dr.								
	Address								
Hallandale	e Beach / Florida 33009								
	City/State and Zip Code		_						
moijafif@f	notmail.com								
E-mail	address: (to be used for future annu	ial report notific	ration)						
For further i	nformation concerning this matter,	please call:							
Moises Ja	fif	305	5274306						
	Name of Person	(	Area Code & Daytime Telephone Number						
Reg Divi Clifi 266	REET/COURIER ADDRESS: istration Section ision of Corporations ton Building I Executive Center Circle ahassee, Florida 32301	Regi Divi P.O.	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314						
Enclosed is a check for the following amount:									
<b>⊿</b> \$	25 Filing Fee	<b>□</b> \$55	Filing Fee & Certified Copy						
INHS18 (2/14	1)								

## 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.

I. N	ame of the limited liability company: Young Sport L	LC						
2. (a)	655 Hibiscus Dr.		(b) 655 Hibiscus Dr.					
_, (,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)						
	Hallandale Beach, FL 33009	Hallandale Beach, FL 33009						
	October 23, 2017	-	L170002	18742				
3.	Date of filing/registration in Florida	4.		Document	number	г		
5. (a	Legalinc Corporate Services Inc.							
·	Registered Agent and Registered Office shown on the records of the 5237 Summerlin Commons, Suite 400  Registered Office Address  (MUST BE FLORIDA STREET A)			- e: -				
	Fort Myers							
	, FL	3390	7	-				
(b)	Moises Jafif				;	20		
` '	Enter name of NEW Registered Agent and/or NEW Registered C	Office	address:	-	•	2018 N	-	
655 Hibiscus Dr.					; <u>(</u> .	NOV -5		
	NEW Registered Office Address:			_	:	ט. ס	i + 1	
	Hallandale Beach			_	; •.	69		
	, FL	3300	9	_		-e		
the ch agent was/w	limited liability company is not organized under the law ange or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited lial vere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the l	he rebility the l	gistered offic- company, it i imited liabilit	e and the bis hereby con y company	usiness o infirmed	office of I that the	the registered change(s)	
		M	loises Jafif					
	ature of a member of authorized representative of a member why accept the approintment as registered agent and agree at a some and complete parties of all years are classive to the proper and complete parties of the proper and complete parties are acceptanced of the proper and acceptance of the proper and provided the properties of the p	e to o perfoi for i ereby	ict in this cap mance of my in Chapter 602 confirm that	Printed or t pacity. I fur duties, and 5, F.S. Or, the limited		_		
Signat	ure of Registerell Agent							

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