

L17000263313

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

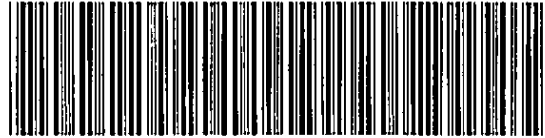
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2018 JUL 18 PM 4:39

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JUL 26 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: YELLOW CHOPPER MEDIA LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michelle Hagen

Name of Person

Krehbiel & Associates LLC

Firm/Company

980 Fairfax Street

Address

Carlyle, IL 62231

City/State and Zip Code

michellehagen@krehbielcpa.com

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

For further information concerning this matter, please call:

Michelle Hagen

Name of Person

at (618) 594-2025

Area Code & Daytime Telephone Number

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

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 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. Name of the limited liability company: YELLOW CHOPPER MEDIA, LLC

2. (a) _____ (b) _____
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

11954 NARCOOSSEE RD #2-101

11954 NARCOOSSEE RD #2-101

ORLANDO, FL 32832

ORLANDO, FL 32832

01/01/2018

L17000263313

3. Date of filing/registration in Florida

4. Document number

5. (a) _____
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

DENIS B HADDAD

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

7512 DR. PHILLIPS BLVD. STE. 50 #754

ORLANDO, FL 32819

(b) _____
Enter name of NEW Registered Agent and/or NEW Registered Office address:

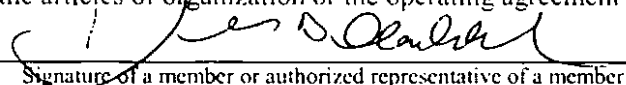
DENIS B HADDAD

NEW Registered Office Address:

11954 NARCOOSSEE RD #2-101

ORLANDO, FL 32832

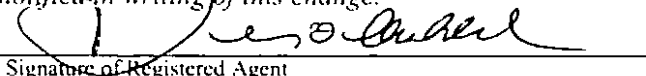
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.


Signature of a member or authorized representative of a member

DENIS B HADDAD

Printed or typed name of signer

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.


Signature of Registered Agent

FILED
2018 JUL 18 PM 4:39
CLERK OF CIRCUIT COURT
JUL 18 2018