

L180003170183

Florida Department of State  
 Division of Corporations  
 Electronic Filing Cover Sheet

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To: Division of Corporations  
 Fax Number : (850)617-6383

From: Account Name : TRIAD PROFESSIONAL SERVICES  
 Account Number : I28160000008  
 Phone : (850)777-2891  
 Fax Number : (770)228-1943

\* RESIGNED

FILED

NOV - 5 AM 9:40

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
 YMP SEASIDE, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	<b>\$55.00</b>

NOV - 6

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2018 NOV - 5 PM 1:24

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### COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: YMP SEASIDE, 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:

Sharon K. Gray

\_\_\_\_\_  
Name of Person

Triad Professional Services

\_\_\_\_\_  
Firm/Company

1720 Windward Concourse, Ste. 390

\_\_\_\_\_  
Address

Alpharetta, GA 30005

\_\_\_\_\_  
City/State and Zip Code

ddomenach@ymprealestate.com

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

For further information concerning this matter, please call:

Sharon K. Gray

770 777-2091

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

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

YMP SEASIDE, LLC

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

2018 NOV -5 AM 9:41  
SECRETARY OF STATE  
TALLAHASSEE, FL

FILED

The Articles of Organization for this Limited Liability Company were filed on 03/14/2018 and assigned  
Florida document number L18000084977

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 office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

Deborah Domenech

New Registered Office Address:

4500 N. State Road 7, Suite 100

*Enter Florida street address*

Lauderdale Lakes

Florida

33319

*City*

*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.*

Deborah Domenech  
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>
P	Ralph L. Godwin, Jr.	4500 N. State Road 7	<input checked="" type="checkbox"/> Add
		Suite 100	<input type="checkbox"/> Remove
		Lauderdale Lakes, FL 33319	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change





November 5, 2018

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

YMP SEASIDE, LLC  
4500 N. STATE ROAD 7 SUITE 100  
LAUDERDALE LAKES, FL 33319US

SUBJECT: YMP SEASIDE, LLC  
REF: L18000064977

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent must sign accepting the designation.

If you have any questions concerning the filing of your document, please call (850) 245-6939.

Tammi Cline  
Regulatory Specialist III

FAX Aud. #: E18000317018  
Letter Number: 718A00022713

2018 NOV -5 PM 1:24