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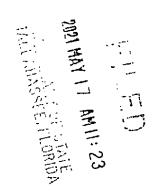
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Special Instructions to	Filing Officer:					
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## **COVER LETTER**

	Registration Section Division of Corporations	· · · · · · · · · · · · · · · · · · ·	
SUBJEC	Change Registered Agent - Yog	a Latitude LLC	-
		Name of Limited L	iability Company
Dear Sir	or Madam:		
The encle	osed Registered Agent/Registered	Office Change and	fee(s) are submitted for filing.
Please ret	turn all correspondence concerning	g this matter to the	following:
Terri Zimi	merman		
	Name of Person		<del></del>
Yoga Lati	tude LLC		
	Firm/Company	··· -	_
8100 Fairs	way Trail		
	Address		
Boca Rato	n, FL 33487		
	City/State and Zip Cod	de	<del></del>
zterri0210	@yahoo.com		
E-m	ail address: (to be used for future	annual report notifi	ication)
For furthe	er information concerning this ma	tter, please call:	
Terri Zimr	nerman	954 at (	254-1410
	Name of Person	w (	Area Code & Daytime Telephone Number
<u>N</u>	lailing Address:		Street Address:
	egistration Section		Registration Section
D	ivision of Corporations		Division of Corporations
	O. Box 6327		The Centre of Tallahassee
T	allahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
			•
E	nclosed is a check for the follow	ing amount:	
	\$25 Filing Fee	<b>1</b> \$5	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.

	ame of the limited liability company: 1004 EATHODE 8100 Fairway Trail		8100 Fairway Trail			
(a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		(b)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Boca Raton, FL 33487	_		Boca Rato	n, FL 33487	
	Date of filing/registration in Florida	—— — 4.	_		Document number	
a)	UNITED STATES CORPORATION AGENTS, INC.				_	
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State 5575 S. SEMORAN BLVD				e:	
	Registered Office Address (MUST BE FLORIDA STREET	T ADDRE	<b>CC</b> 1		_	
	SUITE 36	ADDRA	<u>,,,,,</u>		. ~9	
	Orlando ,FL 32822  Cerri Zimmerman  Inter name of NEW Registered Agent and/or NEW Registered Office address:				no HAY	
)	Terri Zimmerman				10000000000000000000000000000000000000	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:			· · · · · · · · · · · · · · · · · · ·		
	8100 Fairway Trait				M 11: 23	
	NEW Registered Office Address:			•	>	
	Boca Raton	33487			-	
ge Lw wei	mited liability company is not organized under the la or changes are made, the Florida street address of the ill be identical. Or, in the case of a Florida limited li- re authorized by an affirmative vote of the members cles of organization or the operating agreement of the	e registe iability o of the li	red om mite	office and pany, it is ed liability	d the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in	
	fire of a member or authorized representative of a member	Te	rri Z	immermar		
eb sid blig rei	y accept the appointment as registered agent and ag ins of all statutes relative to the proper and complete gations of my position as registered agent as provide ly reflect a change in the registered office address, I in writing of this change.	neriorn	1/771	<i>രമ വി</i> സംവ വ	lution and Lam tamiliar with and acco	