W 1990B

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	e)
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer;	
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Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Yeld Real Estate L	<u> </u>	
Name of Limited Li	ability 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:		
Tom Paterson Name of Person		
Yield Red FState LLC. Firm/Company	_	
Still Bill Headley Rd. Address		
Tallahasser FL, 323/2 City/State and Zip Code	_	
Tomis, Peterson & Comail. Com E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Tom Paterson at (850)	Area Code & Daytime Telephone Number	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Enclosed is a check for the following amount:		
INHS18 (2/14) Seva Alrey Iss	5 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.

	j i
1. Name of the limited liability company: Viela Reclesta LC	<u>.</u>
2. (a) 851/ Bull Howley PA (b) Som	2
Principal office address of limited liability company: Mailing address of	limited liability company: E POST OFFICE BOX)
Tallahaster FL 323/2	
08/20/2018 2/8000	199039
Date of filing/registration in Florida 4. Document nur	iber
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:	
SSII Bill Headley Rd	~ ~
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	024
	E 2024 APR SECRETA
Tolla Miled , FL 323/2	₩ 15 =
(b) Tom Pate (sun	PH ED
(b) Total (304) Enter name of NEW Registered Agent and/or NEW Registered Office address:	- ST
	ີ∷ ຜ _ິ
8511 Bull Headley Rd.	
NEW Registered Office Address:	
Tallahyer, FL 33/2	ļ:
TOMANGE ,FL SOY Z	
f the limited liability company is not organized under the laws of the State of Florida, it is herebhange or changes are made, the Florida street address of the registered office and the business of	confirmed that after the
gent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirm	ned that the change(s)
vas/were authorized by an affirmative vote of the members of the limited liability company or a he articles of organization or the operating agreement of the limited liability company.	sotherwise provided in
Crahame Thomas Po	tera
Signature of a member or authorized representative of a member Printed or typed in	ii -
I hereby accept the appointment as registered agent and agree to act in this capacity. I further rovisions of all statutes relative to the proper and complete performance of my duties, and I am	dree to comply with the familiar with and accept
rovisions of all statutes relative to the proper and complete performance of my duties, and I am he obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this o merely reflect a change in the registered office address, I hereby confirm that the limited liability of this change.	sidocument is being filed lity company has been
otified in writing of this change.	
Signature of Registered Agent	