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SECRETARY OF STATE

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COVER LETTER

TO: Registration Section Division of Corporations		
YELLOW GECKO 2288 LLC SUBJECT:		
Name of Limited L	Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Change and	I fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the	following:	
EENING YEOH		
Name of Person	<u> </u>	
Firm/Company		
6401 S WEST SHORE BLVD #1210		
Address	_	
TAMPA, FL 33616		
City/State and Zip Code	_	
Yeonelning @ gmail (0V) E-mail address: (to be used for future annual report notif	 -:	
·	ication)	
For further information concerning this matter, please call:		
EENING YEOH at (323	, 889 9005	
Name of Person	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 8 Tallahassee, FL 32303	10
Enclosed is a check for the following amount:		
■ \$25 Filing Fee	55 Filing Fee & Certified Copy	RECEIVED

JUL 1 4 2070

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.

(a)	728 SW PINE ISLAND RD STE 4,	(b)	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	CAPE CORAL, FL 33991		
	SEPT 10, 2018	1.1800	00212473
	Date of filing/registration in Florida	4.	Document number
(a)	SCHUTT, DARRIN R. ESQ		
	Registered Agent and Registered Office shown on the records of	the Florida Dept.	of State:
	Registered Office Address (MUST BE FLORIDA STREET) 12601, NEW BRITTANY BLVD	ADDRESS)	2020 Sega
	FORT MYERS, , FL	33907	FIL 1020 JUL 24 SECRETAR) TALLAHA
(b) <u>.</u>	EENING YEOH Enter name of NEW Registered Agent and/or NEW Registered		FILED JUL 24 PM 1:44 RETARY OF STATE LAHLASSEE, FL
	6401 S WEST SHORE BLVD	_	TATE
	NEW Registered Office Address:		
	#1210		
	TAMPAFL	33616	
ige it v /wc	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lia- are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	registered officibility company of the limited lia	ce and the business office of the registered y, it is hereby confirmed that the change(s) ability company or as otherwise provided i
		FULFOON	E. HOH (MGR)
	ture of a member of authorized representative of a member		Printed or typed name of signee

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

Signature of Registored