Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: INCORP SERVICES INC

Account Number : I20120000007

: (702)866-2500

Phone Fax Number

: (702)866-2689

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

Email Address:

Documents Cincorp.com

LLC REGISTERED AGENT CHANGE EYG INVESTMENTS LLC

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Certified Copy	0
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Estimated Charge	\$25.00

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JAN 28 2020

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Corporate Filing Menu

Help

COVER LETTER

FAX No.

TO:	Registration Section Division of Corporations	
CUDE	EYG INV	ESTMENTS LLC
SUBJ		ited Liability Company
Dear S	Sir or Madam:	
The er	nclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter	to the following:
	Jackie DeFilippis	
	Name of Person	
	InCorp Services, Inc.	
	Firm/Company	
	3773 Howard Hughes Pkwy Suite 500S	
	Address	
	Las Vegas, NV 89169-6014	
-	City/State and Zip Code	
	Documents@incorp.com	
	E-mail address: (to be used for future annual repo	t notification)
For fu	nther information concerning this matter, please c	ali:
- Jack	de DeFilippis for InCorp Services, Inc.	(702) 866-2500 Ext. 6915
.	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 810 Tallahassee, FL 32303
	Enclosed is a check for the following amount	:
	■ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy
INHS	18 (2/14)	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LUMITED 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.

(/			(b)						
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)		Mailing at	ddress (of limited l	iability co	ompany:
	8201 Peters Road, Suite 1000		8	3201 Pet	ers Road		-	ZCITLE	<u>D.O.1.</u>)
	Plantation, FL 33324		-		ı, FL 333				
			-						
	10/22/2018		L	1800024	7925				
3,	Date of filing/registration in Florida	— 4.			Docum	ent nu	umber	-	·
5. (a)	YANIV, ERAN								
. (7	Registered Agent and Registered Office shown on the records of	of the Fl	orida [ept. of Sta	te:				
	3448 Sw 49Th Street								
	Registered Office Address MUST BE FLORIDA STREE	TADDE	ESS)		_				
	·				_		•		
	Fort Lauderdale	TL	333	12	_		문업	2020 JAN	
	InCom Condess Inc							ر 0	•
(b)	InCorp Services, Inc. Enter name of <u>NEW Registered Agent and/or NEW Register</u>	. 1 085					,	=	•
	Enter bame of NEW Registered Agent and/or NEW Register	ea Onic	o Rabi	<u>ess</u> :			; '=.	27	<u> </u>
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	NEW Registered Office Address:			-	-			ئە ج	
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FAX COVER SHEET

TO		
COMPANY		
FAX NUMBER	18506176383	
FROM	Kimberly Laughrey	-
DATE	2020-01-27 13:33:09 CST	
RE	12532671 - Lgnd, LLC	

COVER MESSAGE

Robert Sholl Fulfillment Associate Global Fulfillment Operations CT Corporation

Team 614-280-3338 GlobalFulfillmentTeam@wolterskluwer.com



1209 Orange Street Wilmington, DE 19801, www.wolterskluwer.com

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