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JQ 10/08/20

COVER LETTER

	egistration Section , ivision of Corporations ,	.•				
SUBJEC'	Yellow House Financial LLC					
JUBULE	Name of Limited Liability Company					
Dear Sir c	or Madam:					
The enclo	sed Registered Agent/Registered Off	ice Change and fe	ee(s) are submitted for filing.			
Please ret	urn all correspondence concerning th	is matter to the fo	llowing:			
Natalic C	Rainey					
	Name of Person		-			
Yellow Ho	ouse Financial LLC					
	Firm/Company		_			
4455 Kens	ington Cir.					
	Address		_			
Naples FL	34119					
	City/State and Zip Code		_			
yellowhou	sefinancial@gmail.com					
E-m	ail address: (to be used for future ann	ual report notific	ation)			
For furthe	er information concerning this matter,	please call:				
Natalie Ra	iney	270 at (570-1898			
	Name of Person	(Area Code & Daytime Telephone Number			
R D P	egistration Section vivision of Corporations O. Box 6327 allahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
E	nclosed is a check for the following	amount:				
	\$25 Filing Fee	□ \$55	\$55 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.

(a)	4455 Kensington Cir		(b) 4455 Ke	nsington Cir
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Naples, FL 34119		Naples, I	FL 34119
	Nov 12, 2019		L1900028	2098
	Date of filing/registration in Florida	_ 4.		Document number
()	Natalie C Rainey			
(a)	Registered Agent and Registered Office shown on the records of	the Flor	ida Dept, of Si	tate:
	Registered Office Address (MUST BE FLORIDA STREET	ADDRE	<u>(SS)</u>	_
	3525 Eagle Drive			2020 AUG
	Orlando, FI	32804 L		
		_		9 24 AHA
(b)	CAMPAN A LA ALC MUNICIPALITY			S
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	<u>a Office</u>	address:	PM 1:37 OF STATE SEE, FL
	NEW Registered Office Address:			m
	4455 Kensington Cir.			
	Manloc	34119	1	
	Naples, FI	L) 	_
iange gent v as/we	imited liability company is not organized under the la e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited li- ere authorized by an affirmative vote of the members	lws of t e regist iability of the l	he State of I ered office a company, it imited liabi	and the business office of the registered t is hereby confirmed that the change(s) lity company or as otherwise provided in
ange ent v as/w	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited light authorized by an affirmative vote of the members of organization or the operating agreement of the	L ws of t e regist iability of the l e limite	he State of I ered office a company, it imited liabi	and the business office of the registered t is hereby confirmed that the change(s) lity company or as otherwise provided in ompany.
nange gent v as/we e arti	imited liability company is not organized under the la e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited li- ere authorized by an affirmative vote of the members	L ws of t e regist iability of the l e limite	he State of I ered office a company, it imited liabi d liability co	and the business office of the registered t is hereby confirmed that the change(s) lity company or as otherwise provided in ompany.
ange gent v as/we e arti Signa here rovisi e obt	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited light ere authorized by an affirmative vote of the members of organization or the operating agreement of the	L ws of the regist is ability of the limite	he State of I ered office a company, it imited liabi d liability co latalic C Rain	and the business office of the registered t is hereby confirmed that the change(s) lity company or as otherwise provided in ompany. Printed or typed name of signee

FILING FEE: \$25.00