L20000 140288

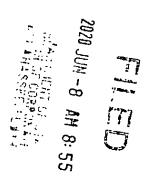
(Requestor's Name)				
(Address)				
(Address)				
(Cit	ty/State/Zip/Phone	/)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Name	e)		
(Document Number)				
Certified Copies	_ Certificates o	of Status		
Special Instructions to Filing Officer:				
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JUN 2 5 2020 S. YOUNG

COVER LETTER

TO:

INHS18 (2/14)

TO:	Registration Section Division of Corporations		·
SUBJ	ECT: Yolo Activities Florida		
	Nan	e of Limited Liabil	ity Company
Dear :	Sir or Madam:		
The e	nclosed Registered Agent/Registered Off	ice Change and fee(s) are submitted for filing.
Please	e return all correspondence concerning th	is matter to the follo	owing:
Bill H	lavre		
	Name of Person		
Regi	stered Agents, Inc.		
	Firm/Company		
7901	4th Street North STE 300		
	Address		
St. P	etersburg, FL 33702		
	City/State and Zip Code		
info@			
	E-mail address: (to be used for future and	ual report notificati	on)
For fu	arther information concerning this matter.	please call:	
Travi	s Martin	at (503)	516-1071
	Name of Person		rea Code & Daytime Telephone Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Registi Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, Florida 32314
	Enclosed is a check for the following	amount:	
	□ \$25 Filing Fee	□ \$55 F	iling 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.

1 1077 1646			
l. Na	ame of the limited liability company: Yolo Activities	es Florida	
2. (a)	Registered Agents, Inc.	_(b) Reg	istered Agents, Inc.
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	7901 4th Street North STE 300	7901	4th Street North STE 300
	St. Petersburg, FL 33702	St. F	Petersburg, FL 33702
	5/22/2020	L2000	00140288
3.	Date of filing/registration in Florida	4.	Document number
5. (a)			
J, (L)	Registered Agent and Registered Office shown on the records of the Florida Dept. of Stat		
	Brody Baker	rody Baker	
	Registered Office Address (MUST BE FLORIDA STREE	ET ADDRESS)	2020 JUN -8
	7901 4th Street North STE 300		
	St. Petersburg	FL 33702	
(b)	Registered Agents Inc.		60 5
. ,	Enter name of NEW Registered Agent and/or NEW Register	red Office address:	
	7901 4th St N		
	NEW Registered Office Address:	-	
	STE 300		
	St. Petersburg	FL_33702	
the cha agent was/w the art	limited liability company is not organized under the ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member icles of organization or the operating agreement of the authorized representative of a member of a member or authorized representative of a member	of the registered I liability compants of the limited li	office and the business office of the registered y, it is hereby confirmed that the change(s) ability company or as otherwise provided in y company.
I here provis the ob- to mer	thy accept the appointment as registered agent and a lions of all statutes relative to the proper and completing of my position as registered agent as provicely reflect a change in the registered office address, discovering of this change.	eie performance o	s capacity. I further agree to comply with the if my duties, and I am familiar with and accep

Bill Havre - Assistant Secretary
Signature of Registered Agent