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(Requestor's Name)					
(Address)					
(Address)					
(Cit	ty/State/Zip/Phone	#)			
PICK-UP	TIAW	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates	of Status			
Special Instructions to Filing Officer:					
J. HORNE MAR - 9 2022					

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COVER LETTER

TO: Registration Section Division of Corporations Y & Z FINANCIAL GROUP LLC	•	
SUBJECT:	of Limited Liability 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:	
LOVETTE DOBSON		
Name of Person		
INCFILE.COM LLC		
Firm/Company	 _	
17350 STATE HWY 249 #220		
Address		
HOUSTON TX 77064		
City/State and Zip Code		
EFILE1234@INCFILE.COM		
E-mail address: (to be used for future annua	l report notification)	
For further information concerning this matter, pl	lease call:	
LOVETTE DOBSON	888 462-3453 at ()	
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 an	mount:	
■ \$25 Filing Fee	☐ \$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.

Ni	ame of the limited liability company: Y & Z FINANCI	AL GROU		
(a)		(b)		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			ng address of limited liability company: te: MAY BE POST OFFICE BOX)
	7711 GEORGIA PEACH DR APT 19103			A PEACH DR APT 19103
	WINTER PARK, FL 32792		WINTER PARK	K. F1. 32792
	02/17/2021	1	.21000081545	
	Date of filing/registration in Florida	 4.	Doc	ument number
4 3				
(a)	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of State:	
	LEGALING CORPORATE SERVICES INC.			
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)		
	5237 SUMMERLIN COMMONS SUITE 400			
	FORT MYERS	33907		
	FORT MYERS , FI		,	
(b)				2022 SEC FALL
•••	Enter name of NEW Registered Agent and/or NEW Registered	d Office add	ress:	CR
	ABDELHAMID MJIDILA			FILED 2FEB 28 AM 9: CRETARY OF CLA
	NEW Registered Office Address:		= 11 · · · · · · · · · · · · · · · · · ·	
	7711 GEORGIA PEACH DR APT 19103			<u> </u>
	WINTER PARK	32792		24
	FIGUREAUX.	32792		
ange ent v as/w	limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited litere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	ws of the ! e registered ability cor of the limited li	l office and the opany, it is here ted liability company ability company	business office of the registere eby confirmed that the change(s npany or as otherwise provided y.
<u>) 4.0'</u> Signa	nture of a member or authorized representative of a member		ABDELHAMID MJIDILA Printed or typed name of	
here ovisi e obi mer	by accept the appointment as registered agent and age ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. I d in writing of this change.	performa Albasia C	n this capacity. ice of my dutie:	I further agree to comply with to s. and I am familiar with and acc