

L21000282936

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

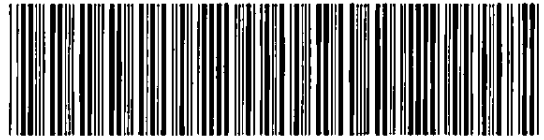
(Document Number)

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FILED  
2024 APR -9 AM 8:15  
SEC. OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Y & I UNION LLC (EIN 87-1372357)  
Name 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:

IAN EDWARDS (former IVAN POPOV)

Name of Person

Y & I UNION LLC

Firm/Company

290 174TH STREET, APT 518

Address

SUNNY ISLES BEACH, FLORIDA 33160

City/State and Zip Code

DOCGYN777@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

IAN EDWARDS

305

781 8993

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 amount:

☐ \$25 Filing Fee

☒ \$55 Filing Fee & Certified Copy

*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.*

2. (a) 290 174TH STREET (b) 290 174TH STREET

Mailing address of limited liability company:  
(Note: MAY BE POST OFFICE BOX)

APT 518

SUNNY ISLES BEACH, FL. 33160

1.21000282936

4. Document number

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

SUNNY ISLES BEACH

Enter name of NEW Registered Agent and/or NEW Registered Office address:

$\frac{1}{\sqrt{2}} \begin{pmatrix} 1 & i \\ 0 & 1 \end{pmatrix}$

IVAN POPOV

Printed or typed name of signee

Signature of Registered Agent

INHS18 (2/14)