## L21000487270

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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A. RIVERS MAY 2 3 2023

## **COVER LETTER**

TO: Registration Se Division of Cor			
	NETWORK LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	unitted for filing	
	ndence concerning this matter	-	
	RAQUEL B MOWRER		
	-	Name of Person	
	ON TARGET BUSINESS	SOLUTIONS LLC	
		Firm/Company	
	7021 GRAND NATIONA	L DR. SUITE 100	
		Address	<del> </del>
	ORLANDO, FL 32819		
		City/State and Zip Code	
	RAQUEL@RMONTARGE E-mail address: (	ET.COM to be used for future annual report	notification)
For further information co	oncerning this matter, please c	•	•
RAQUEL B MOWRER		407 745-170	6
Name of	Person	at () Area Code Da	ytime Telephone Number
Enclosed is a check for th	e following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration S	Section	Street Address Registration	Section
Division of Control P.O. Box 632	•		Corporations of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BRANDON NETWORK LLC	
(Name of the Limited Liability Company as it n (A Florida Limited Liability C	ow appears on our records.) company)
The Articles of Organization for this Limited Liability Company were fil	ed on 11/12/2021 and assigned
Florida document number L21000487270	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability con	npany here:
YL GROUP GLOBAL LLC	
The new name must be distinguishable and contain the words "Limited Liability Comp	any," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address agent and/or the new registered office address here:	on our records, enter the name of the new registered
	20:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	- r*
City	, Florida
New Registered Agent's Signature, if changing Registered Agent:	<u> </u>

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Change
			□Remove
			Change
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f an effec Note: H	re date, if other the crive date is listed, the f the date inserted in nt's effective date o	date must be specific a this block does no	and cannot be prior to t meet the applica	o date of filing or more ble statutory filing r	(optiona than 90 days after filir equirements, this da	l) ng.) Pursuant to 605.0207 ( te will not be listed as t
record d is file		effective date, but n	oot an effective tir	ne, at 12:01 a.m. on	the earlier of: (b)	The 90th day after the
	March 24th		2023	<u>.</u> .		
Dated _		Yorali	1 bbe-	7		
Dated _		Signature of	a member or autho	rized sepresentative of	a member	

Filing Fee: \$25.00