

122000161562

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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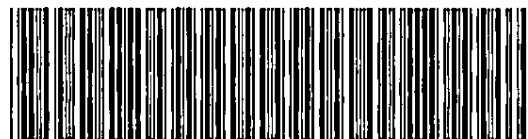
(Business Entity Name)

(Document Number)

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FILED
2022 JUN -7 AM 11:43
SEAL COUNTY STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Yay US 3, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Deborah DeVito
Name of Person

Yay US 3, LLC
Firm/Company

8992 NW 39th Street
Address

Cooper City, Florida 33024
City/State and Zip Code

Juliebchaikin@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Julie Chaikin at (954) 914-4455
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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 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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FILED

YAY US 3. LLC

2022 JUN -7 AM 11:43

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 04/04/2022 and assigned Florida document number 222 000 161562

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

8992 NW 39th Street
Cooper City, FL
33024

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8992 NW 39th Street
Cooper City, FL
33024

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 Changing Registered Agent, Signature of New Registered Agent

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Chaikin, Julie	7146 Estero Blvd.	<input type="checkbox"/> Add
		Ft. Myers Beach, FL	<input type="checkbox"/> Remove
		33931	<input checked="" type="checkbox"/> Change
AMBR	Chaikin, Lauren	3166 Peachtree Circle	<input checked="" type="checkbox"/> Add
		Davie, FL 33328	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	DeVito Deborah	8992 N.W. 39th St.	<input checked="" type="checkbox"/> Add
		Cooper City, FL	<input type="checkbox"/> Remove
		33024	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2022 JUN -7 AM 11:44
SECURITY UNIT
TALLAHASSEE, FL

FILED
2022 JUN -7 AM 11:44
SECURITY STATE
TALLAHASSEE, FL

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated June 2, 2022, _____

Signature of a member or authorized representative of a member

Julie B. Chaikin

Typed or printed name of signee

Filing Fee: \$25.00