

h27 000339120

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(Address)

(City/State/Zip/Phone #)

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STATE DEPT OF STATE
DIVISION OF CORPORATION
22 AUG 11 AM 6:56

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: YMA MANAGEMENT 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:

AMY S. COSTA

Name of Person

YMA MANAGEMENT LLC

Firm/Company

601 SUMMER PLACE

Address

PONTE VEDRA BEACH, FL 32082

City/State and Zip Code

A.COSTA@UNF.EDU

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

For further information concerning this matter, please call:

AMY S. COSTA

904
at ()

333-9919

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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	AMY S. COSTA	601 SUMMER PLACE	<input checked="" type="checkbox"/> Add
		PONTE VEDRA BEACH, FL 32082	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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22 AUG 11 AM 6:56
DIVISION OF CORPORATION

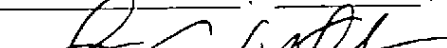
22 AUG 11 AM 6:56

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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.

AUGUST 5TH 2022

Dated _____



Signature of a member or authorized representative of a member

AMY S. COSTA

Typed or printed name of signer

Filing Fee: \$25.00



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Detail by Entity Name

Florida Limited Liability Company
YMA MANAGEMENT LLC

Filing Information

Document Number L22000339120
FEI/EIN Number NONE
Date Filed 08/01/2022
Effective Date 08/01/2022
State FL
Status ACTIVE

Principal Address

601 SUMMER PLACE
601
PONTE VEDRA BEACH, FL 32082

Mailing Address

601 SUMMER PLACE
601
PONTE VEDRA BEACH, FL 32082

Registered Agent Name & Address

AMY, COSTA S
601 SUMMER PLACE
601
PONTE VEDRA BEACH, FL 32082

Authorized Person(s) Detail

Name & Address

Title MGR

COSTA, MICAYLA J
601 SUMMER PLACE
PONTE VEDRA BEACH, FL 32082

Title SEC

COSTA, JORDYN L
601 SUMMER PLACE
PONTE VEDRA BEACH, FL 32082 UN

Title TREA

COSTA, JOSHUA J
601 SUMMER PLACE
PONTE VEDRA BEACH, FL 32082

Annual Reports

No Annual Reports Filed

Document Images

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