

L23000040407

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

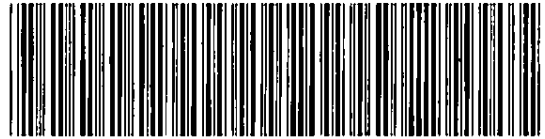
Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

12-22-2023

Office Use Only



000419127910

11/17/23--01027--000 **\$0.00

FILED
2023 DEC 22 PM 4:26
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Yin Home Yoga 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:

Ann Address
Name of Person
Yin Home Yoga LLC
Firm/Company
3236 Forum Blvd #1345
Address
Fort Myers, FL 33905
City/State and Zip Code
yinhomexoga@gmail.com
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FL

2023 DEC 22 PM 4:26

FILED

For further information concerning this matter, please call:

Name of Person at (_____) _____
Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &
Certificate of Status
Previously Sent

☐ \$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

Yin Home Yoga LLC

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>
AMBR	Kimberly DiStefano	382 NE 191st St PMB 504614	<input type="checkbox"/> Add
		Miami, FL 33179	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Ann Abbess	382 NE 191st St PMB 504614	<input checked="" type="checkbox"/> Add
		Miami, FL 33179	<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
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2023 DEC 22 PM 4:26
SECRETARY OF STATE
TALLAHASSEE, FL

SECRET
2023 DEC 22 PM 4: 26
SECRETARY OF STATE
TALLAHASSEE, FL

FILED
2023 DEC 22 PM 4: 26
SECRETARY OF STATE
TALLAHASSEE, FL

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated December 20, 2023

Ann Abess

Typed or printed name of signee

Filing Fee: \$25.00