123000325523

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(Address)
(Address)
(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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September 21, 2023

YVON INNOCENT 450 NW 134TH AVE APT 101 PEMBROKE PINES, FL 33028 US

SUBJECT: YVONBMWTECH LLC Ref. Number: L23000325523

We have received your document and check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

PLEASE CHECK ONE BOX FOR THE MANAGER THAT IS BEING LISTED.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 923A00021904

Jasmine N Horne Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO: · Registration Section

Division of Corporations

YVONEUROTECH LLC SUBJECT: 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: YVON INNOCENT Name of Person YVONEUROTECH LLC Firm/Company 450 NW 134TH AVE APT 101 Address PEMBROKE PINES FLORIDA, 33028 City/State and Zip Code YINNOCENT2015@COMCAST.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: YVON INNOCENT Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ☐ \$25.00 Filing Fee ■ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee. Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed) Mailing Address: Street Address: Registration Section Registration Section Division of Corporations **Division of Corporations** P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	OF	247	
•		(3)/3	
	YVONBMWTECH LLC		
(Name of the Limit	ted Liability Company as it now appears on our (A Florida Limited Liability Company)	24/3/3/3/3/3/3/3/3/3/3/3/3/3/3/3/3/3/3/3	
The Articles of Organization for this Limited L Florida document number	niability Company were filed on 07/02/2023	and assigned	
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	f the limited liability company here:		
YVONEUROTECH LLC			
The new name must be distinguishable and contain the v	words "Limited Liability Company," the designation	"LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applic	cable:		
(Principal office address MUST BE A STREE	ET ADDRESS)		
Enter new mailing address, if applicable:	.		
(Mailing address MAY BE A POST OFFICE	BOX)		
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office address on our records, on our records, on the seconds of the second of the se	enter the name of the new register	
Name of New Registered Agent:	·		
New Registered Office Address:	1512 NW 13TH AVE		
	Enter Florida street	address	
	FORT LAUDERDALE	_, Florida ³³³¹¹	
	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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	YVON INNOCENT	450 NW 134TH AVE APT 101 P.PINES FL 33028	Add
			□Remove
			TChange
			LJRemove
			Change
		 	i Add
			LIRemove
			TChange
			CAdd
			□Remove
			Change
			LIRemove
			Change
			Remove
			Channe

				
				
				
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	•			
ffective date, if other than the	date of filing:		(optional)	
an effective date is listed, the date mus Note: If the date inserted in this bl	ock does not meet the appli	cable statutory filing re	han 90 days after filing.) Pursua quirements, this date will not	nt to 605.0207 t be listed as
ocument's effective date on the De	spartment of State's record	s.		
record specifies a delayed effective is filed.	date, but not an effective	time, at 12:01 a.m. on t	he earlier or: (6) The 90th o	lay after the
JULY 02nd	2023			
Pated		·		
	ACT			
	Signature of a member or auti	Vis	manhar	<u>.</u>
	Signature of a member of auti	nor ved representative or a	memoci	

Filing Fee: \$25.00