M1300000 4852

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				





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D. SCOTT DEC 1 3 2016



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com_

Date: December 5, 2018

Order#: 497154-263

Re: YATES INDUSTRIAL, LLC

Enclosed please find:

XX___ Change of Registered Agent and Office.

XX Check in the amount of \$25

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Ami Casper

c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

MIN OEC -7 PIO NO

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

	ame of the limited liability company: YATES INDUSTRI		
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Philadelphia, MS 39350		-
	08/02/2013	M130000	004852
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	C T Corporation Service Company		
J. (a)	Registered Agent and Registered Office shown on the records of the	Florida Dept, of Stat	
	1200 South Pine Island Road		
	Registered Office Address (MUST BE FLORIDA STREET ADI	ORESS)	
	Plantation . FL_3	33324	다. 다. 다.
(b)			_
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Off</u>	nce address:	
	1201 Hays Street		
	NEW Registered Office Address:	• • •	
	Tallahassee F1 3	22201	-
	Tallahassee FL_3	32301	_
the cha agent v was/w	imited liability company is not organized under the laws or ange or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liabiler authorized by an affirmative vote of the members of the class of organization or the operating agreement of the lim	e registered offic lity company, it i ne limited liabilit	e and the business office of the registered s hereby confirmed that the change(s) sy company or as otherwise provided in inpany.
Signa	ture of amember or authorized representative of a member		Printed or typed name of signee
provisi The obt to mer	to accept the appointment as registered agent and agree tons of all statutes relative to the proper and complete per ligations of my position as registered agent as provided for ely reflect a change in the registered office address. I here it is mixing of this change	to act in this cap formance of my or in Chapter 602 eby confirm that	acity. I further agree to comply with the duties, and I am familiar with and accep 5, F.S. Or, if this document is being filed the limited liability company has been
	ermker	,, ,,,,,	
Signatu	re of Registered Agent Corporation Service Company B	Y: Ami M. Cas	sper, Asst. Vice President

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00