

Division of Corporations

MS0000723

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : YOBI TECHNOLOGY, LLC
Account Number : 120200000112
Phone : (407)351-6656
Fax Number : (407)612-2313

RECEIVED
2024 MAY 30 11:10:55

STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
2024 MAY 30 PM 12:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: ALLT@EXCELTOTALBUSINESS.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
SLIM AND GOLDIE LLC

Certificate of Status	0
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Page Count	05
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MAY 31 2024



May 20, 2024

FLORIDA DEPARTMENT OF STATE
Division of Corporations

SLIM AND GOLDIE LLC
PO BOX 913044
YPSILANTI MI 48197US

7575 KINGSPONTE PKWY STE 2
ORLANDO, FL 32819.

Re: Document Number M15000006723

The Amendment to the Application of a Foreign Limited Liability Company for SLIM AND GOLDIE LLC, a Michigan limited liability company authorized to transact business in Florida, was filed on May 17, 2024.

This document was electronically received and filed under FAX audit number H24000170783.

Should you have any questions regarding this matter, please telephone (850) 245-6051, the Registration Section.

Karen A Saly
Regulatory Specialist II
Division of Corporation

Letter Number: 824A00010952



May 20, 2024

FLORIDA DEPARTMENT OF STATE
Division of Corporations

SLIM AND GOLDIE LLC
PO BOX 973044
YPSILANTI, MI 48197US

SUBJECT: SLIM AND GOLDIE LLC
REF: M15000006723

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please disregard previous letter.

Please state the action you wish for MGR Keith Bogans (add, remove).

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) 245-6051.

Karen A Saly
Regulatory Specialist II

FAX Aud. #: H24000170783
Letter Number: 424A00010953

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SLIM AND GOLDIE, LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ANTONIO CARDOSO
Name of Person

EXCEL TOTAL BUSINESS
Firm/Company

7575 KINGSPORTE PKWY SUITE#2
Address

ORLANDO, FL 32819
City/State and Zip Code

ACCT@EXCELTOTALBUSINESS.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANTONIO CARDOSO at (407) 351-6656 X#102
Name of Person Area Code & Daytime Telephone Number

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

Enclosed is a check for the following amount:

- \$25 Filing Fee
- \$30 Filing Fee & Certificate of Status
- \$55 Filing Fee & Certified Copy
- \$60 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: SLIM AND GOLDIE, LLC

Enter new principal office address, if applicable: 4250 ALAFAYA TRAIL STE 240

(Principal office address MUST BE A STREET ADDRESS) OVIEDO, FL 32765

Enter new mailing address, if applicable: 7575 KINGSPONTE PKWY STE#02

(Mailing address MAY BE A POST OFFICE BOX) ORLANDO, FL 32819

2. The Florida document number of this limited liability company is: M15000006723

3. Jurisdiction of its organization: MICHIGAN

4. Date authorized to do business in Florida: 01/26/2015

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: N/A (must contain "Limited Liability Company," "L.L.C.," or "LLC.")

N/A

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer 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: EXCEL TOTAL BUSINESS

New Registered Office Address: 7575 KINGSPONTE PKWY STE#02, ORLANDO, FL 32819

Enter Florida Street Address

ORLANDO, Florida 32819

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

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7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

N/A

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(c), indicate that change:

CHANGE THE MEMBERS

<u>Title/Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	JENNY BELLOWS	PO BOX 973044	<input type="checkbox"/> Add
		YPSILANTI, MI 48197	<input checked="" type="checkbox"/> Remove
MGR	KEITH BOGANS	7575 KINGSPONTE PKWY STE#02	<input checked="" type="checkbox"/> Add
		ORLANDO, FL 32819	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

Signature of the authorized representative

ANTONIO CARDOSO - REGISTER AGENT

Typed or printed name of signer

Filing Fee: \$25.00