

PO60000117233

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

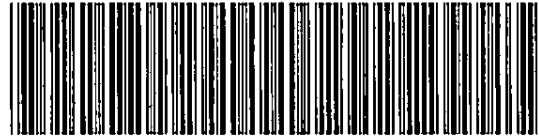
(Business Entity Name)

(Document Number)

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2018-05-07 PM 5:44

R0/chg

MAY 09 2018

LALBRITTON

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Y-Not Promos Corp.  
Name of Corporation

DOCUMENT NUMBER: P06000117233

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Angelina Garcia  
Name of Contact Person

Y-Not Promos Corp  
Firm/Company

3485 NW 65 ST  
Address

Miami FL 33147  
City/State and Zip Code

finance@y-not.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Angelina Garcia at (305) 479-2627  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 23, 2018

ANGELINA GARCIA  
Y-NOT PROMOS CORP.  
3485 NW 65 ST  
MIAMI, FL 33147

SUBJECT: Y-NOT PROMOS CORP.  
Ref. Number: P06000117233

We have received your document for Y-NOT PROMOS CORP. and your check(s) totaling \$50.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Limited Liability Company, but your entity is a Profit Corporation. Please complete and return the enclosed blank form(s).

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.

Irene Albritton  
Regulatory Specialist II

Letter Number: 018A00008146

Remaining \$10.00  
for Y-Not Promos Corp.

RECEIVED  
18 MAY - 7 PM 2:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR  
BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Y-Not Promos Corp.  
2. The principal office address: 3485 NW 65 ST  
MIAMI, FL 33147  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 04/30/2015 Document number: P06000117233

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Angelina Garcia  
16040 E Troon Cir  
MIAMI LAKES, FL 33044

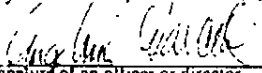
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Angelina Garcia  
3485 NW 65 ST  
P.O. Box NOT acceptable  
MIAMI FL 33147

2018 MAY -7 PM 5:44

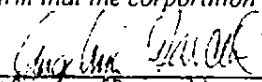
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

Angelina Garcia - CEO  
Printed or typed name and title

*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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

  
Signature of Registered Agent

05/02/2018  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314  
CR2F045 (03/12)