P07000088143

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COVER LETTER

TO:

Amendment Section Division of Corporations

YCO & Associates, Inc.

Name of Corporation

P07000088143

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:

Russell B. Reaves

Name of Contact Person

3J & Associates, LLC

Firm/Company

2323 Del Prado Blvd, S, Ste B1

Cape Coral, FL 33990

City/State and Zip Code

rreaves@ycoffice.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Russell B. Reaves

2018 JAH 31 X Q

Name of Contact Person

239 574-3100
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

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

statement of cha	unge is submitted for a corporati	617.0502, 607.1508, or 617.1508, Florida S on organized under the laws of the State of <u>F</u>	Lorida	
	0 0	or registered agent, or both, in the State of F	lorida.	
I. The name of	the corporation: YCO & Ass	ociates, Inc.		
	office address: 2323 Del Pr	rado Blvd, Suite B1, S		
	oral, FL 33990			
	_{address (if different):} 2323 D∈ Coral, FL=33990	el Prado Blvd, Suite B1, S		
4. Date of incor	poration/qualification: 12/04/	2009 Document number: P0700	0088143	
5. The name and		gistered agent and registered office on file wi	th the	
	Russell Reaves			
	2323 Del Prado Blvd,	Suite B1 S	201	
	Cape Coral, FL 3399	0	2018 JAN 31	
6. The name an (if changed):	d street address of the new regist	ered agent (if changed) and /or registered off		
	PLF Registered Agen	t, LLC		
	1833 Hendry Street			
P.O. Box NOT acceptable				
	Fort Myers, FL 33901	_		
The street addras changed will	ess of its registered office and the identical.	he street address of the business office of its	registered agent,	
Such change w authorized by t	as authorized by resolution duly he board, or the corporation has	adopted by its board of directors or by an obeen notified in writing of the change.	officer so	
LA		R.B. Reaves		
I hereby accept I further agree performance of agent On ifth	to comply with the provisions of my duties, and I am familiar wi is document is being filed merei	Printed or typed name and fille agent and agree to act in this capacity, if all statutes relative to the proper and comfith and accept the obligation of my position by to reflect a change in the registered office notified in writing of this change.	nlete	
	gnature of Registered Agent	01/25/2018		
	chalf of an entity:			
R.B. Reave	es			
т	vped or Printed Name	-		

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