## P1900001594

(Re	equestor's Name)	
(Ac	idress)	
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( )	,	
(Ci	ty/State/Zip/Phone #)	1
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Name)	
· · · · · · · · · · · · · · · · · · ·	ocument Number)	
(1.2	cument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
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2019 JAN 18 PH 1: 04 SECRETARY OF STAFF



## **COVER LETTER**

TO: Amendment Section **Division of Corporations** Yewcreek, Inc. Name of Corporation P19000001594 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: Darya Kovalska Name of Contact Person DearthGalat LLC Firm/Company 2859 Paces Ferry Road SE, Ste 1140 Atlanta, GA 30339 City/State and Zip Code Darya@dgtaxlaw.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Darya Kovalska Name of Contact Person

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 ch	ange is submitted for a corporati	. 617.0502, 607.1508, or 617.1508, Florida Statutes, t on organized under the laws of the State of Florida	his
		or registered agent, or both, in the State of Florida.	
	the corporation: Yewcreek, I		
2. The principa	office address: 301 S. NEW	YORK AVENUE, SUITE 200, WINTER PARI	K, FL 327
3. The mailing	address (if different):		
4. Date of incom	rporation/qualification: 12/26/	2018 Document number: P190000015	94
5. The name an Florida Depa	nd street address of the current regartment of State: (If resigned, enter	gistered agent and registered office on file with the er resigned)	
	CORPORATE CREAT	IONS NETWORK INC.	
	11380 PROSPERITY	FARMS ROAD #221E	
	PALM BEACH GARDE	ENS, FL 33410	5
6. The name an (if changed):	d street address of the new regist	ered agent (if changed) and /or registered office	SECRET
	Joy Myers		ASS.
	301 S New York Ave.,		E E
	Winter Park, FL 32789	D. BOX NOT acceptable	LOHI STATE
The street addr	ess of its registered office and the identical.	he street address of the business office of its registere	ed agent,
Such change wanthorized by t	ras authorized by resolution duly the board, or the corporation has	adopted by its board of directors or by an officer so been notified in writing of the change.	
- Again	ACO OT OF OF OFFICE OF	Ulrike Weeber, Chief Executive O	fficer
I hereby accep I further agree performance o agent. Or, if the hereby confirm	t the appointment as registered of to comply with the provisions of f my duties, and I am familiar wi his document is being filed merel a thorthe corporation has been n	agent and agree to act in this capacity,  f all statutes relative to the proper and complete  ith and accept the obligation of my position as regist  by to reflect a change in the registered office address  notified in writing of this change.	ered , I
( Get	2	1/16/19	
	enalure of Recistered Agent  chalf of an entity:	Da¥	
1	Typed or Printed Name	-	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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