

P2600000 15581

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

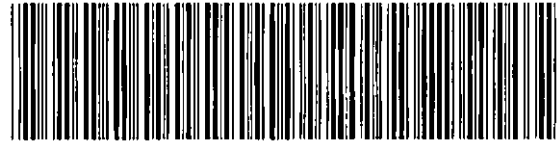
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

J. HORNE
FEB - 6 2025

Office Use Only



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FILED
2025 FEB - 5 AM 11:18
RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CSC - Tallahassee
1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext:

To: Department Of State, Division Of Corporations
From: Ben Bolen - Ben.Bolen@cscglobal.com
Ext:
Date: 02/05/25
Order #: 1816725-1
Re: YCO Management Inc
Processing Method: Routine

A handwritten signature in black ink, appearing to read "Ben Bolen", is written in a cursive style.

TO WHOM IT MAY CONCERN:

Enclosed please find:

Change of Registered Agent and Office

Check in the amount of: \$25 - FL State Account Number: I20000000195

Please take the following action:

File on a routine basis

Issue proof of filing

Special Instructions:

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

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: YCO Management Inc
Name of Corporation

DOCUMENT NUMBER: P20000070581

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:

Andrew Jordan

Name of Contact Person

YCO Management Inc

Firm/Company

645 East Las Olas Boulevard

Address

Fort Lauderdale FL33301

City/State and Zip Code

awj@y.co

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

For further information concerning this matter, please call:

Andrew Jordan

Name of Contact Person

at (954) 2783970

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: YCO Management Inc
2. The principal office address: 945 East Las Olas Boulevard, Fort Lauderdale, Florida 33301

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 09/01/2020 Document number: P20000070581

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)

CATARINEAU, CONNIE F

8000 SW 117 AVE, SUITE 204

Miami

FL 33183

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

Corporation Service Company

1201 Hays Street

P.O. Box NOT acceptable

Tallahassee

FL 32301

FILED
2025 FEB -5 AM 11:48

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.

James Foster

Signature of an officer or director

James Foster

Director

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.

Corporation Service Company

By: Benjamin Bolen
Signature of Registered Agent

02/05/2025

Date

If signing on behalf of an entity:

Benjamin Bolen

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

CR2E045 (04/13)

COA-58194