P94000082088

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Nan	ne)
(D	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	,
<u> </u>		

Office Use Only



800240900058

10/19/12--01008--013 **35.00

10:01 N 61 130 34

RA RO Ch 8
(10) 10) 19/12

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: Y-R-M Corporation

Name of Corporation

DOCUMENT NUMBER:

P94000082088

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:

Spencer Fox

Name of Contact Person

Spencer Fox, P.A.

Firm/Company

201 S. Biscayne Blvd. 17th Floor

Address

Miami, FL 33131

City/State and Zip Code

sf@spencerfoxlaw.com

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

For further information concerning this matter, please call:

Spencer Fox

,305

341-3145

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

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

statement of cha	provisions of sections 607.0302, 617.0302, 607.1308, or 617.1308, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida
	er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	the corporation: Y-R-M CORPORATION
	office address: 2055 82nd Avenue
	nch, FL 32966
	lale, FL 33008
4. Date of incorp	poration/qualification: 11/9/1994 Document number: P9400082088
5. The name and	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)
	Rossz FIU Corporation
	201 S. Biscayne Blvd., Ste. 850
	Miami, FL 33131
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office Spencer Fox
	Spencer Fox 59
	201 S. Biscayne Blvd., 17th Floor P.O. Box NOT acceptable Miami, FL 33131
	P.O. Box NOT acceptable
	ess of its registered office and the street address of the business office of its registered agent, l be identical.
Such change was authorized by	as authorized by resolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change.
	ye of an officer or director Ralph Mutchnik President Printed or typed name and title
I hereby accept I further agree performance of agent. Or, if th hereby confirm	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete f my duties, and I am familiar with and accept the obligation of my position as registered its document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
Sp	mature of Registered Agent Date
If signing on be	ehalf of an entity:
T	Typed or Printed Name

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