

P95000022200

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

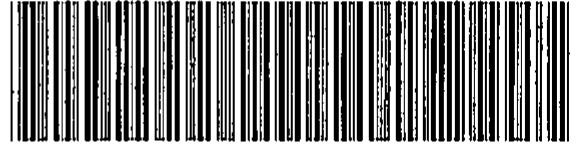
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400333492064

08/22/19--01005--000 \*\*35.00

S TALLENT  
SEP 03 2019

FILED  
2019 AUG 22 PM 3:59  
SECRETARY OF STATE  
TOLSON, FREDERICK

2/14-24

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: The Yard Masters Inc.  
Name of Corporation

DOCUMENT NUMBER: P95000022200

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:

Albert Maness  
Name of Contact Person

The Yard Masters Inc.  
Firm/Company

10471 SW 201 terrace  
Address

Cutler Bay, FL 33189  
City/State and Zip Code

LawnGenetics@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Albert Maness at ( 305 ) 484-8660  
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**

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: The Yard Masters, Inc.  
2. The principal office address: 14364 SW 113 terrace  
Miami, FL 33186  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 03/20/1995 Document number: P95000022200  
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)

Matthew Lewis  
14364 SW 113 terrace  
Miami, FL 33186 (Resigned)

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

Albert Maness  
10471 SW 201 terrace  
P.O. Box NOT acceptable  
Cutler Bay, FL 33189

FILED  
2019 AUG 22 PM 3:59  
SEC. OF STATE  
TALLAHASSEE, FL

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.

Matthew Lewis  
Signature of an officer or director

Matthew Lewis (President)  
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.

Al Maness  
Signature of Registered Agent

8-19-19  
Date

If signing on behalf of an entity:

Albert Maness  
Typed or Printed Name

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