N05000009172

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Roberts JUN 23 2010

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Firehouse Subs Public Safety Foundation, Inc.
Name of Corporation

DOCUMENT NUMBER: N05000009172

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:

Heather Richardson
Name of Contact Person

Firehouse Subs
Firm/Company

3400-8 Kori Road
Address

Jacksonville, FL 32257
City/State and Zip Code

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

For further information concerning this matter, please call:

Ronda Wilson at (904) 886-8300 ext. 241
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

CR2E045 (8/05)

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: Firehouse Subs Public Safety Foundation, Inc.

2. The principal office address: 3400-8 Kori Road

3. The mailing address (if different):

4. Date of incorporation/qualification: 09/07/2005 Document number: N05000009172

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)

Charles Curley Jr

1301 Riverplace Blvd. Suite 1500

Jacksonville, FL 32207

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TALLAHASSEE, FLORIDA

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

Jonathan L. Hay

1548 Lancaster Terrace

P.O. Box NOT acceptable

Jacksonville, FL 32204

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.

Robin Peters

Signature of an officer or director

Robin Peters, Executive 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.

Jonathan L Hay

Signature of Registered Agent

06-11-10

Date

If signing on behalf of an entity:

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

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