F0300001768

(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



000416566610

RAZ RO Change

The state of the s

TILED

RECEIVED

A. RAMSEY OCT 13, 2023



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date:1	0/12/2023	
Name:		
Reference #:_	0400500	
Entity Name:_	FOOD SERVIC	E RENOVATIONS, INC.
Articles	of Incorporation/Authorization	on to Transact Business
☐ Amend	ment	
Change	e of Agent	
☐ Reinsta	atement	
☐ Conver	sion	
☐ Merger		
☐ Dissolu	tion/Withdrawal	
☐ Fictitiou	us Name	
Other_	····	
Authorized Am Signature:	nount: \$35.00	

P: 800.221.0102

F: 800.944.6607

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

statement of cha	nge is submitted for a corporati	, 617,0502, 607,1508, or 617,1508, Flo ion organized under the laws of the Stat or registered agent, or both, in the Stat	_{te of} Georgia		
1. The name of t	he corporation: FO	OD SERVICE RENOVA	TIONS, INC.		
2. The principal	office address: No Change				
3. The mailing a	ddress (if different):				
4. Date of incorp	poration/qualification: April	9, 2003 Document number:	F03000001768		
	street address of the current reg tment of State: (If resigned, ente	gistered agent and registered office on f er resigned)	ile with the		
	Corporation	n Service Company			
1201 Hays Street					
	Tallahasse	e, FL 32301-2525	23 00		
6. The name and (if changed):	street address of the new regist	ered agent (if changed) and /or register	PM23 OCT 12 PM 12 26 and office series for the series of		
	115 North Calhou	n St., Suite 4	- 26		
	Tallahassee, FL	32301			
The street addre	ss of its registered office and the identical.	ne street address of the business office	of its registered agent,		
		adopted by its board of directors or been notified in writing of the change			
/s/ David Ger	shman	David Gershman Printed or typed name	Secretary		
I further agree t performance of a gent. Or, if thi	o comply with the provisions o my duties, and I am familiar w s document is being filed mere	agent and agree to act in this capacity fall statutes relative to the proper and ith and accept the obligation of my po- ly to reflect a change in the registered iotified in writing of this change.	l complete sition as registered		
/s/ Tim Mayville		09/25/2023			
If signing on bel	nalf of an entity:	Date			

Tim Mayville, Assistant Secretary

Typed or Printed Name

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