L01000000141

ERIC BAKE	R	_
TIMEOUT KIT		
11510 S.W. 1	04 STREET	
MIAMI, FL.		
City/State/Zip	Phone #	

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known

1. Timeout Kitchen LL	
(Corporation Name)	(Document #) 900055924095 -06/05/0201041001 ******25.00 ******25.00
(Corporation Name)	(Document #)
(Corporation Name)	(Document #)
4. (Corporation Name)	(Document #)
☐ Walk in ☐ Pick up time	Certified Copy
☐ Mail out ☐ Will wait	Photocopy Certificate of Status
NEW FILINGS	<u>AMENDMENTS</u>
Profit Not for Profit	Amendment Resignation of R.A., Officer/Director
Limited Liability	Change of Registered Agent
Domestication	Dissolution/Withdrawal
Other	Dissolution/Withdrawal Merger REGISTRATION/OUALIFICATION
OTHER FILINGS	
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark
	Other

Examiner's Initials

CR2E031(7/97)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

agent, or both, in the state of Prortace.	
1. The name of the limited liability company is: TIMEOUT	KITCHEN LLC .
2. The mailing address of the limited liability company is: 115	10 S.W. 104 STREET .
MIA	MI, FL. 33176
FILED DEC. 29, 2000, EFFECTIVE JAN. 3, 2001 L	•
5. The name of the registered agent and the registered office address Florida Department of State:	ess as shown on the records of the
ERIC BAKER Name 7969 5.W. 104 5T. #A Address	.10Z
Address MIAMI FL. City, State and Zip	OZ JU
6. The name and address of the new registered agent and/or office ERIC BAKER Name 11510 5.W. 104 51 Florida street address (P.O. Box NOT	FILEN TARY UF STATION OF STATION
MIAMI FL 331 City, State and Zip	76
If the limited liability company is not organized under the laws of confirmed that after the change or changes are made, the Florida's and the business office of the registered agent will be identical. O liability company, it is hereby confirmed that the change(s) was/w of the members of the limited liability company or as otherwise p or the operating agreement of the limited liability company. (Signature of a member or authorized representative of a member)	the State of Florida, it is hereby treet address of the registered office r, in the case of a Florida limited ere authorized by an affirmative vote rovided in the articles of organization
(Printed or typed name of signee) I hereby accept the appointment as registered agent and agree to comply with the provisions of all statutes relative to the proper and and I am familiar with and accept the obligations of my position a Chapter 608, F.S. Or, if this document is being filed to merely refladdress, I hereby confirm that the limited liability company has be (Signature of Registered Agent)	act in this capacity. I further agree to a complete performance of my duties, s registered agent as provided for in lect a change in the registered office en notified in writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

INHS18(10/99)

FILING FEE: \$25.00