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FLORIDA DEPARTMENT OF STATE Glenda Ē. Hood Secretary of State

November 5, 2003

CATFISH COUNTRY OF SOUTH TAMPA 4418 W. GANDY BLVD. TAMPA, FL 33611

SUBJECT: H & T FOOD CONCEPTS, LLC Ref. Number: L01000012890

We have received your document for H & T\_FOOD CONCEPTS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

If you have any questions concerning the <u>filing</u> of your document, please call (850) 245-6043.

Joey Bryan Document Specialist

Letter Number: 103A00060282



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

<u>-</u>:.

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.

1. The name of the limited liability company is. H&T FOOD CONCEPTS, LLC

2. The mailing address of the limited liability company is : 1582 GULF BLVD, #1304, CLEARWAT

- AUGUST 1, 2001
   L01000012890

   3. Date of filing/registration in Florida
   4. Document number
- 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

	KENNETH HUTTO, CPA	ON THE	
n togo and <del>or and the second se</del>	1935 E. EDGEWOOD DR., BUILDING I	STATISTICS STATISTICS	
	Address LAKELAND, FL 33803	FILED BRATE	
	City, State and Zip	Eroo E.	
6. The na	ame and address of the new registered agent and/or office:	OT TO	
-	KRIKOR KEVORKIAN	ALOP-S	
$\bullet$	3408 YOUNG RD Name		
	Florida street address (P.O. Box NOT acceptable)		
	PLANT CITY, FL 33565		
	City, Stafe and Zip		
confirmed and the bi liability c the memb	ited liability company is not organized under the laws of the State of Flo: d that after the change or changes are made, the Florida street address of usiness office of the registered agent will be identical. Or, in the case of company, it is hereby confirmed that the change(s) was/were authorized b bers of the limited liability company or as otherwise provided in the artic, ting agreement of the limited liability company.	the registered office a Florida limited wan allimnative vote of	
(Signature of	f a member or authorized representative of a member)	··· ·· · · · · · · · · · · · · · · · ·	
KRIKOF	RKEVORKIAN	• <u>-</u> .	
(Printed or t	typed name of signee)	······································	
I hereby comply w and I am Chapter o address, I	accept the appointment as registered agent and agree to act in this capa ith the provisions of all statutes relative to the proper and complete performing familiar with and accept the obligations of my position as registered age 508, F.S. Or, if this document is being filed to merely reflect a change in thereby confirm that the limited liability company has been notified in w	city. I further agree to ormance of my duties, int as provided for in The registered office witting of this change.	
(Signamie o	Registered Agenu	· ·,	

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

ENHS18(10/99)

FILING FEE: \$25.00

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