# 1000019109

(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:						
J. HORNE						
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DATE: 07/09/2024

- NAME: T J F FRANCHISE GROUP LLC

TYPE OF FILING: Change of 24

COST:

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**AUTHORIZATION: ABBIE/PAUL HODGE** 

#### COVER LETTER

TO: `	Registration Section Division of Corporations						
SUBJE	T J F FRANCHISE GROUP, LLC						
0000	Name of Limited Liability Company						
Dear Si	r or Madam:						
The end	closed Registered Agent/Registered Offic	e Change a	nd fee(s) are submitted for filing.				
Please	return all correspondence concerning this	matter to th	ne following:				
Jame G	reco						
	Name of Person						
Tijuana	Flats Restaurants, LLC						
	Firm/Company		<del></del>				
2300 N	Aaitland Center Parkway, Stc. 306						
	Address						
Maitlan	d, FL 32751						
	City/State and Zip Code		<del></del>				
jim.gree	co@tijuanaflats.com						
E	-mail address: (to be used for future annu	al report no	tification)				
For fur	ther information concerning this matter, p	lease call:					
Casey I	Rees	407 at (	339-2222				
	Name of Person	_	Area Code & Daytime Telephone Number				
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
	Enclosed is a check for the following a	mount:					
	■ \$25 Filing Fee	0	\$55 Filing Fee & Certified Copy				

INHS18 (2/14)

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

Pursicant to the provisions of sections 605.0114 or 605.0116, 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. Na	ame of the limited liability company: T J F FRANCHIS	E GROU	IP, LLC	
2. (a)	T J F FRANCHISE GROUP, LLC		T J F FRA	NCHISE GROUP, LLC
()	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_		Mailing address of limited liability company:  (Note: MAYBE POST OFFICE BOX)
	2300 Maitland Center Parkway, Ste. 306		2300 Maitle	and Center Parkway, Stc. 306
	Maitland, FL 32751	_	Maitland, F	L 32751
	.08/28/2001		L01000014	609
3.	Date of filing/registration in Florida	4.	· · · · · · · · · · · · · · · · · · ·	Document number
5. (a)	Joseph Christina			
3. (u)	Registered Agent and Registered Office shown on the records of	the Florid	a Dept. of State	- ::
	-			
	2300 Maitland Center Pkwy., Ste. 306			202
	Maitland, FL	32751		2024 Jr.
(b)	James Greco			9
(0)	Enter name of NEW Registered Agent and/or NEW Registered Office address:			i i i i i i i i i i i i i i i i i i i
	NEW Registered Office Address:			C-1
	2300 Maitland Center Pkwy., Ste. 306			_
	Maitland , FL	32751		_
change agent was/w	limited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	register bility co of the lin	ed office and impany, it is nited liability	I the business office of the registered thereby confirmed that the change(s) company or as otherwise provided in
		Jam ——	es Greco	
I Here provis the ob- to mer notifie	dure of a member or authorized representative of a member by accept the appointment as registered agent and agri ions of all statutes relative to the proper and complete ligations of the position as registered agent as provided ely reflect of change in the registered office address, I had in writing of this change	ee to aci perform I for in ( iereby c	t in this capa ance of my a Chapter 605, onfirm that t	Printed or typed name of signee neity. I further agree to comply with the duties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been
- B.I.J.	Jaines Cicco			

#### COVER LETTER

TO: Registration Section Division of Corporations		
T J F FRANCHISE GROSUBJECT:	UP, LLC	
	Name of Limited	Liability Company
Dear Sir or Madam:		
The enclosed Registered Agent/Regis	stered Office Change an	d fee(s) are submitted for filing.
Please return all correspondence cond	cerning this matter to the	e following:
Jame Greco		
Name of Per	rson	
Tijuana Flats Restaurants, LLC		
Firm/Compa	iny	<del></del>
2300 Maitland Center Parkway, Stc. 300	6	
Address		
Maitland, FL 32751		
City/State and Z	ip Code	<del></del>
jim.greco@tijuanaflats.com		
E-mail address: (to be used for	future annual report not	ification)
For further information concerning th	nis matter, please call:	
Casey Rees	407 at (	339-2222
Name of Person		Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the	following amount:	
■ \$25 Filing Fee	<b>a</b> :	\$55 Filing Fee & Certified Copy
INHS18 (2/14)		