103000012215

•		
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #)	
PICK-UP		MAIL
(Ru	siness Entity Name)	
·		
(Do	cument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to Filing Officer:		
12/27	RA Ch	ange
	ι	
102	-12216	
	1001)

Office Use Only



200042996222

12/27/04--01059--001 **50.00

Marine.

04 DEC 27 PN 3: 57

SPOTTSWOOD, SPOTTSWOOD AND SPOTTSWOOD

ATTORNEYS AND COUNSELORS AT LAW 500 FLEMING STREET POST OFFICE BOX 1900 KEY WEST, FLORIDA 33041-1900

JOHNM. SPOTTSWOOD, JR.
WILLIAM B. SPOTTSWOOD
ERICA N. HUGHES

TELEPHONE 305-294-9556 FAX 305-292-1982

OF COUNSEL:

JOHN M. SPOTTSWOOD (1920-1975) ROBERTA. SPOTTSWOOD

December 22, 2004

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

RE: 2 for 20 Pizza, LLC

Dear Sir or Madam:

Enclosed are the Statement of Change of Registered Office or Registered Agent for a Limited Liability Company and Resignation of Member, Managing Member or Manager regarding 2 for 20 Pizza, for filing. Also enclosed is our firm's check in the amount of \$50.00, which represents filing fees of \$25.00 for the Statement of Change of Resignation of Registered Agent and \$25.00 for the Resignation of the Managing Member.

If you have any questions, please do not hesitate to contact our office.

Sincerely,

Gae Ganister, Assistant to ERICA N. HUGHES, Esq.

/gg

Enclosures

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.

1. The name of the limited liabilit	y company is: 2 FOR 20 PIZZA. LLC
2. The mailing address of the limi	ted liability company is: 30348 Overseas Highway.
Big Pine Key, FL 33043	
April 4, 2003	L03000012215
3. Date of filing/registration in Flo	orida 4. Document number
5. The name of the registered agen Florida Department of State:	t and the registered office address as shown on the records of the
Chris	Stopher J. Stanard Name
_30348	Address Pine Key, FL 33043 City, State and Zip
Big I	Pine Key, FL 33043
	City, State and Zip
6. The name and address of the ne	w registered agent and/or office:
Lanny	P. Gardner
	Name 5
30348	Overseas Highway
Florida	a street address (P.O. Box NOT acceptable)
Big 1	Pine Key FL 33040 City, State and Zip
·	City, State and Zip
confirmed that after the change or and the business office of the regis liability company, it is hereby con- the members of the limited liabilit the operating agreement of the lim	
(Signature of a member or authorized represe	ntative of a member)
Lanny P. Gardner (Printed or typed name of signee)	
I hereby accept the appointment of comply with the provisions of all s and I am familiar with and accept Chapter 608, F.S. Or, if this docu address, I hereby confirm that the	is registered agent and agree to act in this capacity. I further agree to tatutes relative to the proper and complete performance of my duties, the obligations of my position as registered agent as provided for in ment is being filed to merely reflect a change in the registered office limited liability company has been notified in writing of this change.
Lanny P. Gardner X	

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