

203 0000 32338

Gray/Robinson Attys @ law  
(Requestor's Name)

P.O. Box 1870  
(Address)

(Address)

Melbourne, FL 32902-1870  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

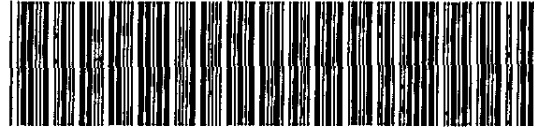
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**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Palm Restaurant, LLC  
(Name of corporation)

**DOCUMENT NUMBER:** L03000032338

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Philip F. Nohrr, Esq.  
(Name of person)

GrayRobinson, P.A.  
(Name of firm/company)

1800 West Hibiscus Boulevard, Suite 138  
(Address)

Melbourne, Florida 32901  
(City/state and zip code)

For further information concerning this matter, please call:

Philip F. Nohrr, Esq. at ( 321 ) 727-8100  
(Name of person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

**FILED**  
04 JUN 22 PM 1:01  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

GRAY|ROBINSON  
ATTORNEYS AT LAW

SUITE 138  
1800 WEST HIBISCUS BLVD. (32901)  
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MELBOURNE, FL 32902-1870  
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CLERMONT  
KEY WEST  
LAKE LAND  
MELBOURNE  
ORLANDO  
TALLAHASSEE  
TAMPA

June 21, 2004

Philip F. Nohrr, Esq.

E-MAIL ADDRESS:  
pnohrr@gray-robinson.com

File No. 95430-4

Division of Incorporation  
Attn: Marsha Thomas  
Document Specialist  
Certification Section  
409 East Gaines Street  
Tallahassee, FL 32399

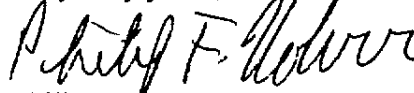
Re: Palm Restaurant, LLC  
Ref Number: L03000032338

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04 JUN 22 PM 1:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Dear Ms. Thomas:

Pursuant to your letter of May 25, 2004, our client has filled out and executed, and I have signed as Registered Agent for the Palm Restaurant, LLC on the Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company that you provided to us. Please file this document with the Secretary of State's office, and provide us with notice that same has been filed.

Very truly yours,

  
Philip F. Nohrr

PFN/hms  
Enclosure  
cc: Mr. Ed Scott



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

May 25, 2004

GRAY/ROBINSON ATTYS @ LAW  
PO BOX 1870  
MELBOURNE, FL 32902-1870

SUBJECT: PALM RESTAURANT, LLC  
Ref. Number: L03000032338

We have received your document for PALM RESTAURANT, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas  
Document Specialist

Letter Number: 804A00036

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04 JUN 22 PM 1:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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.*

- |   |                     |
|---|---------------------|
| <u>08/27/03</u>   | <u>L03000032338</u> |
| 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: |                     |

6. The name and address of the new registered agent and/or office:

Philip F. Nohrr, Esq.  
c/o GrayRobinson, P.A.  
1800 West Hibiscus Boulevard, Suite 138  
Florida street address (P.O. Box NOT acceptable)  
Melbourne FL 32901  
City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Cheryl S. Scott  
(Signature of a member or authorized representative of a member)

Cheryl S. Scott  
(Printed or typed name of signee)

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

(Signature of Registered Agent)

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