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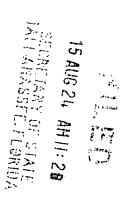
| (Re | questor's Name) | | | | |
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| PICK-UP | ☐ WAIT | MAIL | | | |
| (Bu | siness Entity Nar | me) | | | |
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| . Certified Copies | _ Certificate: | s of Status | | | |
| Special Instructions to Filing Officer: | | | | | |
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Office Use Only



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AUG 25 2015 J SHIVERS

COVER LETTER

| | istration Section sion of Corporations | · | · | | |
|---|---|----------------------|---|--|--|
| SUBJECT: | CARSON'S ROAD HOUSE | OF FORT MY | ERS, L.L.C. | | |
| | Nar | ne of Limited Lia | bility Company | | |
| Dear Sir or I | Madam: | | | | |
| The enclosed | d Registered Agent/Registered Of | fice Change and for | ee(s) are submitted for filing. | | |
| Please return | n all correspondence concerning th | nis matter to the fo | ollowing: | | |
| James R. | Beuche | | | | |
| | Name of Person | | _ | | |
| Hooper H | athaway, P.C. | | | | |
| | Firm/Company | | - | | |
| 126 S. Ma | ain Street | | _ | | |
| | Address | | | | |
| Ann Arboi | r, MI 48104 | | | | |
| | City/State and Zip Code | | ··· | | |
| cnichols@ |)hh-pc.com | | | | |
| E-mail | address: (to be used for future an | nual report notific | ation) | | |
| For further i | nformation concerning this matter | , please call: | | | |
| Christine I | Nichols | 734 at (| 662-4426 | | |
| | Name of Person | | Area Code & Daytime Telephone Number | | |
| Reg Divi Clif 266 | REET/COURIER ADDRESS: istration Section ision of Corporations ton Building 1 Executive Center Circle ahassee, Florida 32301 | Reg Divi P.O. | ILING ADDRESS: istration Section sion of Corporations Box 6327 ahassee, Florida 32314 | | |
| Enclosed is a check for the following amount: | | | | | |
| ☑ \$ | 25 Filing Fee | □ \$55 | Filing Fee & Certified Copy | | |

INHS18 (2/14)

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

Pursuant 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. N | lame of the limited liability company: CARSON'S | S ROAD H | OUSE OF F | ORT MYERS, L.L.C. |
|---------------------------|--|--|--|--|
| 2. (a) | 605 S MAIN STREET | (b | 605 S. MA | IN STREET |
| 2. (a, | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | | Maili | ing address of limited liability company: lote: MAY BE POST OFFICE BOX |
| | SUITE 2 | • | SUITE 2 | |
| | ANN ARBOR, MI 48104 | <u> </u> | ANN ARBO | DR, MI 48104 |
| | 09/29/2009 | | L040000696 | 608 |
| 3. | Date of filing/registration in Florida | 4. | Do | cument number |
| 5. (a | Michael C. Gibbons | | | |
| J. (u | Registered Agent and Registered Office shown on the record | ls of the Florida | Dept. of State: | |
| | 21775 Sound Way | | | |
| | Registered Office Address (MUST BE FLORIDA STRE | ! | | |
| | Unit 102 | | | |
| | Estero | , _{FL} 33928 | | 3 5 5 T |
| (b) | Michael C. Gibbons | | | 28 AUG 75 |
| | Enter name of NEW Registered Agent and/or NEW Register | ered Office add | ress: | SS 24 |
| | 4761 West Bay Blvd. | | | |
| | NEW Registered Office Address: | | | H:2 |
| | Unit 2002 | | | |
| | Estero, FL | , _{FL} 33928 | | |
| the chagent was/v | limited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member ticles of organization or the operating agreement of | s of the regised liability co ers of the lime the limited lime | tered office an mpany, it is he ited liability co lability compar | d the business office of the registered ereby confirmed that the change(s) empany or as otherwise provided in |
| Sign | ature of a member or authorized representative of a member | 14110 | | inted or typed name of signee |
| provi: the ol to me | eby accept the appointment as registered agent and sions of all statutes relative to the proper and comploligations of my position as registered agent as proverly reflect a change in the registered office addressed in writing of this change. | agree to act lefe performa vided for in C s, I hereby co | in this capacit ince of my duti hapter 605, F. infirm that the | y. I further agree to comply with the es, and I am familiar with and accept S. Or, if this document is being filed limited liability company has been |

Signature of Registered Agent

Min