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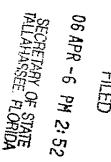
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MIDWAY NOUSE, LLC
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MIDWAY HOUSE, CLC
(Firm/Company)

LAKE Worth, FL 33460
(City/State and Zip Code)

For further information concerning this matter, please call:

TOHN RUCHAN at (561) 329.4869
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Enclosed is a check for the following amount:

\$25 Filing Fee \$\sum \square \\$55 Filing Fee & Certified Copy

S



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 20, 2006

JOHN BUCHAN MIDWAY HOUSE, LLC 1528 SO FEDERAL HWY LAKE WORTH, FL 33460

SUBJECT: MIDWAY HOUSE, LLC Ref. Number: L04000074179

We have received your document for MIDWAY HOUSE, 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):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office,

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

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

Marsha Thomas Document Specialist

Letter Number: 006A000188

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 liability company is: MIDWAY NOWE, LLC	
2. The mailing address of the limited liability company is: 1528 So. I-EDENAL HU	04
LAKE WARTH, FL 33460	ľ
	•
Det 13, 2004 L040006 74/79	
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: SPIEGE QUIRERA, P. A.	
1840 SW 22ND ST	
Name 1840 SW 22ND ST Address MIANI, FL 33145 City, State and Zip	
6. The name and address of the new registered agent and/or office:	
MINNEY HOURS HE TOHN RUCH	AL
Name 1528 So. FEDERAL HWY Florida street address (P.O. Box NOT acceptable)	
LAKE Worth FL 33460 City, State and Zip	
<u> </u>	
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 of fice 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 openization or the operating agreement of the limited liability company.	
(Signature of a member or authorized representative of a member)	
TOHO BUCHAN (Printed or typed name of signee)	
(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.	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

INHS18 (8/05)

Signature of Registered Agent)