L05000055408

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	ed Copies Certificates of Status					
Special Instructions to Filing Officer:						

Office Use Only



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06/30/14--01038--030 **35.00



LLC RA Change 9-4-14



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 16, 2014

MELANIE E. HARMAN NEW ENGLAND RETAIL, LLC 1419 NE JENSEN BEACH BLVD JENSEN BEACH, FL 34957

SUBJECT: LOBSTER BROTHERS, LLC

Ref. Number: L05000055408

We have received your document for LOBSTER BROTHERS, 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):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The proper form is enclosed 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) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 114A00015265

RECEIVED

14 SEP - 3 M 10: 44

14 SEP - 3 M 10: 44

15 SEP - 3 M 10: 44

15 SEP - 3 M 10: 44

COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT: Lobote Brothers, 114 Name of Lim	ited Liability Company					
Name of Eminted Claoting Company						
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office Change	ge and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter	to the following:					
Melanic E Harman Name of Person						
Labeter Brothers LLC Firm/Company						
1919 NE Jensen Beach Blu & Address						
Jensen Beach FL 34957 City/State and Zip Code						
E-mail address: (to be used for future annual repor	t notification)					
For further information concerning this matter, please ca	all:					
Melanie E Harman at (772) 33 Y-6666 Ext Y 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	☐ \$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.	Na	me of the limited liability company: Loboter 1	Biothe	12, 11 4		
				Mailing address of		
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			of limited liability co BE POST OFFICE I	
		1419 NE Jensen Beach Blut		1419 NE Jens	ien Beach Bl	<u>, r</u>
		Jensen Beach FL 34957		Jensen Beach	FL 34957	
		6/6/05		10500005	-5 40 8	
3:		Date of filing/registration in Florida	4.	Document nu	umber	
5.	(a)	Registered Agent and Registered Office shown on the records of the		and with the later common or property where		
			e Florida D	ept. of State;		
		John Mellaci				
		Registered Office Address (MUST BE FLORIDA STREET A)				
		1419 NE Jensin Beach Bluk				
		Jensen Beach , FL	3795	7		
					至為 🕏	
	(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	Man addu		St. I	~~
		Enter frame of NEW Registered Agent and/or NEW Registered C	onice audri	535 .	F -3	
		Robert 5 Kiamer				7
		NEW Registered Office Address:)
		2300 SE Monterry R& Suite	00		4: 06	
		Stnat ,FL	3 499	16		
the age	cha int v s/we	mited liability company is not organized under the law nge or changes are made, the Florida street address of t vill be identical. Or, in the case of a Florida limited lial are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	s of the Sine registe bility com	tate of Florida, it is her red office and the busi pany, it is hereby conf ed liability company or	iness office of the irmed that the cha	registered ange(s)
		ary of a member or authorized representative of a member		JOHN N	VELL ACI	
S	ignat	are of a member or authorized representative of a member			ed name of signee	
pro the to i	ovisi obl nere	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I had in writing of this change.	e to act in performan for in Ch ereby con	this capacity. I furth ce of my duties, and L apter 605, F.S. Or, if t firm that the limited lic	er agree to compl am familiar with this document is t ability company h	ly with the and accept being filed as been
Sig	natu	re of Registered Agent				