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SECRETARY OF STATE SECRETARY SEE, FLORIDA

C. LEWIS SEP 2 9 2009 EXAMINER

## **COVER LETTER**

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**TO:** Registration Section Division of Corporations Horsefeathers Grille & Lounge, LLC **SUBJECT:** (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: Tom Tyler (Name of Person) Thomas C. Tyler, Jr., P.A. (Firm/Company) 735 East Venice Avenue, Suite 200 (Address) Venice, Florida 34285 (City/State and Zip Code) For further information concerning this matter, please call: Tom Tyler (Name of Person) (Area Code & Daytime Telephone Number) **MAILING ADDRESS:** STREET/COURIER ADDRESS: Registration Section Registration Section **Division of Corporations** Division of Corporations Clifton Building P.O. Box 6327 Tallahassee, Florida 32314 2661 Executive Center Circle Tallahassee, Florida 32301 Enclosed is a check for the following amount:

\$55 Filing Fee & Certified Copy

✓ \$25 Filing Fee

## 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. Na	me of the limited liability company: Horse	efeathers Grille & Lounge, LLC	
2. (a)	Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	y: 5824 Bee Ridge Road, Box 422 Sarasota, Florida 34233	
(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	same as above	
	2-28-2006	L06000022010	
3. Da	te of filing/registration in Florida	4. Document number	
5. (a)	Registered Agent and Registered Office shown of Registered Agent:	on the records of the Florida Dept. of State:  Thomas C. Tyler, Jr., P.A.	
	Registered Office Address:	981 Ridgewood Avenue, Suite 104 Venice, Florida 34285	
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>	EW Registered Office address:	
	NEW Registered Agent:	Thomas C. Tyler, Jr., P.A.	
NEW Registered Office Address:	NEW Registered Office Address:	735 East Venice Avenue, Suite 200	
•	(MUST BE FLORIDA STREET ADDRESS)	Venice,FL_34285	
that a office hereb liabili limite	of the change or changes are made, the Florida structure of the registered agent will be identical. Or, in the confirmed that the change(s) was/were authorized company or as otherwise provided in the articles of liability company.  The of a number of authorized representative of a member)	ne laws of the State of Florida, it is hereby confirme reet address of the registered office and the business of case of a Florida limited liability company, it is d by an affirmative vote of the members of the limits of organization or the operating agreement of the	
(	Higgins Gayheart, Manager d or typed name of signee)	<del></del>	
I here compl am fa F.S. ( confir	eby accept the appointment as registered agent and with the provisions of all statutes relative to the miliar with ahd accept the obligations of my position, if this document is being filed to merely reflect method the limited liability company has been notif	d agree to act in this capacity. I further agree to proper and complete performance of my duties, and on as registered agent as provided for in Chapter 6 a change in the registered office distress. hereby field in writing of this change.	
(Signat	ure of Registered Agent)	ARETA SARAS	
( o i Budi	Division of Corporations, P.O. B FILING FI	ox 6327, Tallahassee, FL 32314	

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