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PICK-UP] WAIT	MAIL
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Special Instructions to Filing	Officer:	
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COVER LETTER

TQ: Registration Section			
Division of Corporations			
SUBJECT: Bucky's Barbeque, LLC			_
	f Limited Liability Company)		+
(Name of	Elimed Blabinty Company)		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Of	ffice Change and fee(s) are submitted for filing.		
The enclosed Registered Agent Registered Of	thee change and rec(s) are sublinated for fining.		
Please return all correspondence concerning t	his matter to the following:		
•			
Charles D. Barnett			
(Name of Person)			
(Firm/Company)			
8412 Native Dancer Road	ĀS	80	
(Address)	ECA AAR	×	
	ASIA ASIA		
Palm Beach Gardens, FL 33418	HE SHE	- 9	FILED
(City/State and Zip Code)		=	U
	SEE. FLORING	08 MAY 19 AM 10: 15	
For further information concerning this matte	₽m	CIT	
For further information concerning this matte	n, please can.		
Charles D. Barnett	at (561) 622-6655		
(Name of Person)	(Area Code & Daytime Telephone Number)		
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section	Registration Section		
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327		
2661 Executive Center Circle	Tallahassee, Florida 32314		
Tallahassee, Florida 32301	i qimimosoo, i lorida 32311		
Enclosed is a check for the following	g amount:		
☑ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy		
Limb I CC	i woo i ning i ee ac continua copy		

INHS18 (5/08)

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.

in the state of Floriaa.		
1. Name of the limited liability company: Bucky's Ba	rbeque, LLC	+
2. (a) Principal office address of limited liability compan (<i>Note: MUST BE STREET ADDRESS</i>)	ny: 5090 PGA Blvd., Suite 200 Palm Beach Gardens, FL 33418	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	5090 PGA Blvd., Suite 200 Palm Beach Gardens, FL 33418	#
April 27, 2006 3. Date of filing/registration in Florida	<u>L06000044303</u> 4. Document number	
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:	
Registered Agent:	Charles D. Barnett	
Registered Office Address:	8412 Native Dancer Road Palm Beach Gardens, FL 33418	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u>	W Registered Office address:	₽
NEW Registered Agent: NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	5090 PGA Blvd, Suite 200 Palm Beach Gardens	
If the limited liability company is not organized under the that after the change or changes are made, the Florida strenoffice of the registered agent will be identical. Or, in the chereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles climited liability company.	laws of the State of Florida, it is hereby confirmet address of the registered office and the business case of a Florida limited liability company, it is by an affirmative vote of the members of the lim	ss iited

(Signature of a member or authorized representative of a member)

Mark O. Rodberg

(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 doctonent is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liquidity company has been notified in writing of this change.

(Signature of Registered Agent)

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