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CSC - WILMINGTON Suite 400 2711 Centerville Road Wilmington De 19808 800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Anthony Holmes

aholmesl@cscinfo.com

Date: May 30, 2014

Order#: 140843/030

Re: RATTLEFISH RAW BAR AND GRILL, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn: Anthony Holmes

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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.	Name	e of the limited liability company: RATTLEFISH RA	W BAR	R AND GRILL, LLC		
2. (a	a)		_ (b)))		
Ì	, 	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	Mailing address of limited liability of (Note: MAY BE POST OFFICE	ompany: <i>BOX</i>)	
	_	3949 Evans Avenue, Suite 102	3949 Evans Avenue, Suite 102			
	_	Fort Myers, FL 33901	_	Fort Myers, FL 33901		
		05/25/2006	_	L06000054236		
3.		Date of filing/registration in Florida	4.	Document number		
5. (a) _					
	Ro	egistered Agent and Registered Office shown on the records of th	e Florida I	i Dept, of State:		
	_	Florida Marina Clubs, LLC				
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
	_	3949 Evans Avenue, Suite 102				
		Fort Myers, FL_	33901	I		
(1	/ —	Corporation Service Company		Accorded to first the second s		
	Er	nter name of NEW Registered Agent and/or NEW Registered C	Office add	dress:	* ***	
		4004 Have Charak		۔ یخ	<u>-</u>	
		1201 Hays Street EW Registered Office Address:			at fa	
	15	Registered Office Address.		છ		
	_			 중		
				5	7 10 1- T	
	1	「allahassee, FL	32301		<u> </u>	
the cagen was/ the a	thang twil were trticle	ited liability company is not organized under the law- ge or changes are made, the Florida street address of the identical. Or, in the case of a Florida limited liab authorized by an affirmative vote of the members of the spizalism of the liable contact.	he regist bility cor the limi imited li	stered office and the business office of the ompany, it is hereby confirmed that the chaited liability company or as otherwise proliability company. The Priebe, Authorized Person	e registered ange(s)	
Sig	gature	a member of authorized representative of a member		Printed or typed name of signee		
prov the c	isión obliga erelv	accept the appointment as registered agent and agre s of all statutes relative to the proper and complete p ations of my position as registered agent as provided reflect a change in the registered office address, I ha writing of the change.	e to act . performa for in C preby co.	in this capacity. I further agree to comp ance of my duties, and I am familiar with Chapter 605, F.S. Or, if this document is onfirm that the limited liability company i	ly with the and accept being filed has been	

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

Signature of Registered Agent Corporation Service Company BY: Sylvia Queppet, Assistant Vice President