

W06000094169

00789-00524-00671

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

W06-94169

(Document Number)

Certified Copies _____ Certificates of Status _____

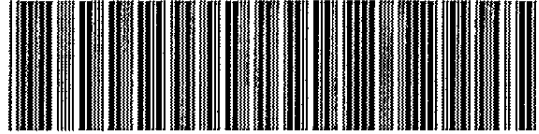
Special Instructions to Filing Officer:

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LC R/A
change

MBH

Office Use Only



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06 NOV -9 PM 4:31
SECRETARY OF STATE
TALLAHASSEE FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 30, 2006

BARBARA EBBERUP
SALTY DOG LUNCH SPOT, LLC
205-A S. 2ND STREET
FLAGLER BEACH, FL 32136

SUBJECT: SALTY DOG LUNCH SPOT, LLC
Ref. Number: L06000094169

We have received your document for SALTY DOG LUNCH SPOT, 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):

You must complete the attached form to change the Registered Agent information for this Limited Liability Company, the form submitted is for a Corporation.

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) 245-6967.

Michelle Hodges
Document Specialist

Letter Number: 406A00064124

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Salty Dog Lunch spot 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:

Barbara Ebercup
(Name of Person)

Salty Dog Lunch spot LLC
(Firm/Company)

205 A S. 2nd Street
(Address)

Flagler Beach FL 32136
(City/State and Zip Code)

For further information concerning this matter, please call:

Barbara Ebercup at (369) 503-0778
(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

☐ \$55 Filing Fee & Certified Copy

**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: Salty Dog Lunch Spot LLC

2. The mailing address of the limited liability company is : 205A S. 2nd Street

Flagler Beach FL 32136

3. Date of filing/registration in Florida 9/26/06 4. Document number L06000094169

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Barbara Ebberup
Name
1842 B South AIA
Address
Flagler Beach FL 32136
City, State and Zip

6. The name and address of the new registered agent and/or office:

Barbara Ebberup
Name
205A S. 2nd St.
Florida street address (P.O. Box NOT acceptable)
Flagler Beach FL 32136
City, State and Zip

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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 office 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 organization or the operating agreement of the limited liability company.

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

Barbara Ebberup
(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.

Barbara Ebberup
(Signature of Registered Agent)

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