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GIVISION OF CORPORATIONS

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Shula's Steak Houses H (Name of	oldings, LLC of Limited Liability Company)
Dear Sir or Madam:	
The enclosed Registered Agent/Registere	ed Office Change and fee(s) are submitted for filing.
Please return all correspondence concern	ing this matter to the following:
Deborah Love	
(Name of Person)	
Friedman, Rosenwasser, & Goldba	ovision of co
5355 Town Center Road, Suite 801	OF CONTROL
(Address)	PH 3: 45
Boca Raton, Florida 33486	# 5
(City/State and Zip Code)	
For further information concerning this n	natter, please call:
Deborah Love	at (561) 395-5511 ext. 514
(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 follo	owing 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: Shula's Steak Houses Holdings, LLC	_ ·	
2.	2. The mailing address of the limited liability company is: 6843 Main Street, Miami Lakes, FL 33014		
10	10/11/2006 <u>L06000099621</u>	·*	
3.	3. Date of filing/registration in Florida 4. Document number		
5.	5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:		
	Miami Center Registered Agents, LLC		
Name			
	201 S. Biscayne Blvd., Ste. 1700		
	Address	_	
	Miami, Florida 33131	<u>₹</u>	
	City, State and Zip The name and address of the new registered agent and/or office:	<u> </u>	
6. The name and address of the new registered agent and/or office:		ETARY OF CO	
Corporate Creations International, Inc.		SP CF	
11380 Prosperity Farms Rd., #221-E		語	
	Name 11380 Prosperity Farms Rd., #221-E Florida street address (P.O. Box NOT acceptable)	ONS	
	Palm Beach Gardens, FL 33410		
	City, State and Zip		

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.

Ranala N. Raseuwasse (Signature of a member or authorized representative of a member)

Ronald N. Rosenwasser, Esq., Authorized Representative

(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.

(Signature of Registered Agent)

Commoda,

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