

LO7000012206

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

DEC - 3 2008

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BRAXTON'S OYSTER BAR & GRILL, 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:

JOHNNY RISTER
(Name of Person)

CLIENT SERVICES PLUS, LLC
(Firm/Company)

3158 MAIN ST., P.O. BOX 531
(Address)

COTTONDALE, FL 32431
(City/State and Zip Code)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

JOHNNY RISTER at (850) 352-4050
(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 25, 2008

JOHNNY REGISTER
P.O. BOX 531
COTTONDALE, FL 32431

SUBJECT: BRAXTON'S OYSTER BAR & GRILL, LLC
Ref. Number: L07000012206

FILED
08 DEC -2 AM 10:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for BRAXTON'S OYSTER BAR & GRILL, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

A post office box is not an acceptable address for the registered agent.

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) 245-6984.

Deborah Bruce
Regulatory Specialist II

Letter Number: 208A00058385

**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. Name of the limited liability company: BRAXTON'S OYSTER BAR & GRILL, LLC

2. (a) Principal office address of limited liability company: 2643 LEVY ST
(Note: MUST BE STREET ADDRESS) COTTONDALE, FL 32431

(b) Mailing address of limited liability company: 2643 LEVY ST
(Note: MAY BE POST OFFICE BOX) COTTONDALE, FL 32431

02/01/2007

L07000012206

3. Date of filing/registration in Florida

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: ROGER L LANEY, III

Registered Office Address: 1378 N. RAILROAD AVE
CHIPLEY, FL 32428

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent: JOHNNY RISTER

NEW Registered Office Address: 3158 MAIN STREET
(MUST BE FLORIDA STREET ADDRESS) COTTONDALE, FL 32431

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.

Mike Braxton

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

MIKE BRAXTON

(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)

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