L07000030744

| (Requestor's Name) | | | | | |
|---|--------------------|-----------|--|--|--|
| (Ad | ldress) | | | | |
| (Ad | ldress) | | | | |
| (Cit | ty/State/Zip/Phone | e #) | | | |
| PICK-UP | ☐ WAIT | MAIL | | | |
| (Bu | siness Entity Nan | ne) | | | |
| (Do | ocument Number) | | | | |
| Certified Copies | _ Certificates | of Status | | | |
| Special Instructions to Filing Officer: | | | | | |
| | | | | | |
| | | | | | |
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Office Use Only



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

| Division of Corporations | | - | | |
|---|---|-------------------------|-------------------------------|---------|
| SUBJECT: Quiet Zoo Cafe, LLC | | | | |
| | Limited Liab | ility Company) | | |
| • | | | | |
| Dear Sir or Madam: | | | | |
| The enclosed Registered Agent/Registered | Office Chang | e and fee(s) are subm | itted for filing. | |
| Please return all correspondence concerning | g this matter t | o the following: | | |
| | | | | |
| Michael Hsiao | | <u></u> | | |
| (Name of Person) | | | | |
| Quiet Zoo Cafe, LLC | | | | |
| (Firm/Company) | | | 201 SE | |
| 340 N Fig Tree Ln | | | OT JUN | FILED |
| (Address) | | | ARY | F |
| Plantation, FL 33317 | | | ARY OF STATE SSEE, FLORIDA | |
| (City/State and Zip Code) | | _ | STA1 ORI | D |
| | | | 03 0A | |
| For further information concerning this mat | tter, please ca | ll: | | |
| Michael Hsiao | at (954 | \ 536 - 4794 | • | |
| (Name of Person) | (| (Area Code & Dayt | ime Telephone | Number) |
| | | | | |
| STREET/COURIER ADDRESS: | | AILING ADDRESS: | | |
| Registration Section Division of Corporations | Registration Section Division of Corporations | | | |
| Clifton Building | P.O. Box 6327 | | | |
| 2661 Executive Center Circle | Tallahassee, Florida 32314 | | | |
| Tallahassee, Florida 32301 | | | | |
| Enclosed is a check for the following | ing amount: | | | |
| \$25 Filing Fee | \$55 Filing Fee & Certified Copy | | | |

. INHS18 (8/05)

TO: Registration Section

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 compa | ny is: Quiet Zoo Cafe, LLC | | <u> </u> | | |
|--|---|--|--|---|--|--|
| 2. The mailing addr | ess of the limited liabil | lity company is : 340 N Fig Tree Ln, | Plantation, FL | 33317 | | |
| 03/21/2007 | | L07000030744 | L07000030744 | | | |
| 3. Date of filing/reg | istration in Florida | 4. Document nu | 4. Document number | | | |
| 5. The name of the r Florida Departme | egistered agent and the nt of State: | e registered office address as shown | on the records | s of the | | |
| | Michael Hsiao | | _ | | | |
| | 7304 NW 19th (| Name Ct | | | | |
| | | Address | TAS: | | | |
| | Pembroke Pines | | 2007 JUN SECRET! | 77 | | |
| | | City, State and Zip | EM S | | | |
| 6. The name and add | lress of the new registe | ered agent and/or office: | N III TARY ASSET | ILED | | |
| | Michael Hsiao | | _ ਜ਼ੌਜ਼ੀ ਹ | | | |
| | 340 N Fig Tree L | Name Ln | 2: 03 STATE LORID | | | |
| | Florida street ac | ddress (P.O. Box NOT acceptable) | P _m ω | | | |
| | Plantation, | FL 33317 | | | | |
| | C | City, State and Zip | | | | |
| confirmed that after and the business offi liability company, it of the members of to or the operating agree | the change or changes ce of the registered ago is hereby confirmed th | | s of the register e of a Florida l ed by an affirn | red office imited native vote | | |
| Michael Hsiao | | | | | | |
| (Printed or typed name of | • / | | | | | |
| I hereby accept the comply with the provand I am familiar with Chapter 608, F.S. Caddress, I hereby co | , | red agent and agree to act in this c elative to the proper and complete p gations of my position as registered eing filed to merely reflect a chang iability company has been notified | apacity. I furt. performance of agent as provi e in the registe in writing of th | her agree to f my duties, ided for in ered office iis change. | | |

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