## L07000113310

•		
(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Division of Fuels Allows)		
(Business Entity Name)		
(Document Number)		
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SECULIANT OF STATE
ALLAMASSEE, FLORIE

B. BOSTICK

JAN 2 4 2011

EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: BULLDOL BBQ L Name of Limited	Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office C	hange and fee(s) are submitted for filing.		
Please return all correspondence concerning this ma	tter to the following:		
Darven Friedman Name of Person			
Foreman Friedman, p			
2 South Biscayne Blvd. S	JAN 21 AH II: 55  ORE LARY OF STATE  AHASSEE, FLORID,  Ste. 230		
Miami, FL 33131 City/State and Zip Code	FLORIDA		
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Parven Friedman at ( 3	Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section Division of Corporations	Registration Section Division of Corporations		
Clifton Building	P.O. Box 6327		
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314		
Enclosed is a check for the following amou	int:		
\$25 Filing Fee	\$55 Filing Fee & Certified Copy		

## \$TATEMENT 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: Bulldog	BBQ, LLC	
2. (a) Principal office address of limited liability compar	y: Amy wil	asien
(Note: MUST BE STREET ADDRESS)	598 bolden B	
(b) Mailing address of limited liability company:	mmy wil	askin
(Note: MAY BE POST OFFICE BOX)	598 bolden Be	
11 108 2007  3. Date of filing/registration in Florida	4. Document number	10
5. (a) Registered Agent and Registered Office shown on	the records of the Florida l	Dept. of State:
Registered Agent:	Amy wilds	·
Registered Office Address:		Beach Drive
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NI</u> <u>NEW</u> Registered Agent: <u>NEW</u> Registered Office Address:	Darren Fria 2 South Bisco	2d man
(MUST BE FLORIDA STREET ADDRESS)	SUIK 2300 Miami	,FL 33131
If the limited liability company is not organized under the confirmed that after the change or changes are made, the land the business office of the registered agent will be identiability company, it is hereby confirmed that the change of the members of the limited liability company or as other the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member  Printed or typed name of signee  I hereby accept the appointment as registered agent and accomply with the provisions of all statutes relative to the proceeding of the complete to the process of the complete to the complete to the process of the complete to the comp	laws of the State of Florida Florida street address of the hical. Or, in the case of a F s) was/were authorized by a crwise provided in the articley.	a, it is hereby registered office florida limited in affirmative vote es of organization

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

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