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Certified Copies	_ Certificates	s of Status
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B. BOSTICK DEC 9 2010 EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations	·	
	WARE ZIZ, Z	### T
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	e Change and fee(s) are submitted for	r filing.
Please return all correspondence concerning this	matter to the following:	
SEYMOUR ORLINSKY Name of Person		
DIET OINNEAWARE 4L	-1 C ·	74.
6575 ABBEY RD. Address	<del></del>	10 DEC -8 AP
PARKLAND, FL. 3300 City/State and Zip Code	67	AHII: I
E-mail address: (to be used for future annual report notifica	in NET	5 DA
For further information concerning this matter, pl		
Seymour On Durkly at (	(50) 445-4480 Area Code & Daytime Telephone No	umber
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 an	nount:	
\$25 Filing Fee	\$55 Filing Fee & Certified Co	ру

## 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. liability company submits the following statement in ordagent, or both, in the State of Florida.	508, Florida Statutes, the undersigned limited ler to change its registered office or registered
1. Name of the limited liability company:	DINNERWARE LILIC
2. (a) Principal office address of limited liability compar	ny: 6575 ARREY RD.
(Note: MUST BE STREET ADDRESS)	PARKLAND, FL. 3306
(b) Mailing address of limited liability company:	6575 PRREYRO.
(Note: MAY BE POST OFFICE BOX)	PARKENDJEL 33067
200	<del>208000</del> 72266
3. Date of filing/registration in Florida	4. Document number L08 0000 9 2266
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	SEYMOUR PALINSKY
Registered Office Address:	BOCA RATON, FL 33-596
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE NEW</u> Registered Agent:	W Registered Office address:
NEW Registered Office Address:	6575 ABREY RD.
(MUST BE FLORIDA STREET ADDRESS)	PARL AND ,FL 33067
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 ider liability company, it is hereby confirmed that the change (so the members of the limited liability company or as other or 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 comply with the provisions of all statutes relative to the product of the provisions of all statutes relative to the product of the provisions of the obligations of my proceedings. Thereby confirm that the limited liability company.  Signature of Registered Agent	Florida street address of the registered office ntical. Or, in the case of a Florida limited s) was/were authorized by an affirmative vote erwise provided in the articles of organization by.