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SECRETARY OF STATE
ANASSEE, FI ORIDA

J. SAULSBERRY EXAMINER

AUG 12 2011



## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Prevatt & Sports 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:		
Brandon Prevatt Name of Person		
Prevatt's Sports Bar + Grill, LLC	2011 AUG 11 SECRETAR TALLAHASS	<u>T</u>
2620 Blanding Blud #17	ARY OF STATE	FED
Middleburg FL 32068  City/State and Zip Code	ATE RIDA	
90-torbsp@ Comcost on et  DE-mail address: (4) be used for future annual report notification)		
For further information concerning this matter, please call:		
Brandon Prevat at (904) 126-4020  Name of Person Area Code & Daytime Telephone Num	mher	
STREET/COURIER ADDRESS:  Registration Section  Division of Corporations  Clifton Building  2661 Executive Center Circle  MAILING ADDRESS:  Registration Section  Division of Corporations  Division of Corporations  P.O. Box 6327  Tallahassee, Florida 32314	11001	

\$55 Filing Fee & Certified Copy

Tallahassee, Florida 32301

\$25 Filing Fee

Enclosed is a check for the following amount:



## 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: 2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 00*0*00 51300 3. Date of filing/registration in Flor Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Agent: Registered Office Address: 0C bolotypu (b) Enter name of NEW Registered Agent and/or NEW Registered Office address **NEW** Registered Agent: **NEW** Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) 32068 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 aperating 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 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. 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. randon Mua Signature of Registered Agen