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DEPARTMENT OF STATE DIVISION OF CORPORATIONS TALUAHASSEE, FLORIDA

RECEIVED

11 DEC 22 PM 11 LO



CT Corporation

1203 Governors Square Blvd. Suite 101
Tallahassee, FL 32301-2960

850 222 1092 tel 850 222 7615 fax www.ctcorporation.com

TOEC 22 PA WAY NO

December 21, 2011

Department of State, Florida Clifton Building 2611 Executive Center Circle Tallahassee FL 32301

Re:

Order #: 8336804 SO

Customer Reference 1: None Given Customer Reference 2: None Given

Dear Department of State, Florida:

Please obtain the following:

Tri County Burgers 8, LLC (FL) Change of Agent Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Connie R Bryan Senior Fulfillment Specialist Connie.Bryan@wolterskluwer.com

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: TRI COUNTY BU	RGERS 8, LLC	
2. (a) Principal office address of limited liability company		
(Note: MUST BE STREET ADDRESS)	ALTAMONTE SPRINGS FL 32714 247 N WESTMONTE DR	
(b) Mailing address of limited liability company:	247 N WESTMONTE DR	
(Note: MAY BE POST OFFICE BOX)	ALTAMONTE SPRINGS FL 32714	
08/04/2010	L10000081808	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on t	the records of the Florida Dept. of State:	
Registered Agent:	W. TERRY COSTOLO, ESQ.	
Registered Office Address:	GRAYROBINSON, P.A. 301 W PINE ST - STE 1400 ORLANDO FL 32801	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u> <u>NEW Registered Agent</u> :	C T Corporation System	
NEW Registered Office Address:	1200 South Pine Island Road	
(MUST BE FLORIDA STREET ADDRESS)	Plantation ,FL 33324	
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Floand the business office of the registered agent will be identiliability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as otherwor the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	orida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization	
Kristin Bolden, Manager	_	
Printed or typed name of signee I hereby accept the appointment as registered agent and age comply with the provisions of all statutes relative to the proving and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to mer address, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to per and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office has been notified in writing of this change.	

Signature of Registered Agent Assistant Secretary
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 **FILING FEE: \$25.00**

James M. Halpin

M Corporation System