## L11000055769

(R	equestor's Name	)
(A	ddress)	
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EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations	
•	
SUBJECT:	PHILIPPE CHOW BOCA, L.L.C.
	Name of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Re	egistered Office Change and fee(s) are submitted for filing.
Please return all correspondence c	concerning this matter to the following:
ANTHONY ACCETT  Name of Person	
LAW OFFICES OF ANTHO Firm/Company	NY ACCETTA, P.A.
200 S. BISCAYNE BOULE Address	VARD, SUITE 2930
MIAMI, FLORID City/State and Zip 0	<del></del>
AA@ACCETTALAV E-mail address: (to be used for future a	VFIRM.COM nnual report notification)
For further information concerning	g this matter, please call:
ANTHONY ACCETTA	
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDI	
Registration Section	Registration Section
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327
2661 Executive Center Circle	
Tallahassee, Florida 32301	. Tananassee, Fiorida 32314
Enclosed is a check for th	e following amount:
\$25 Filing Fee	\$55 Filing Fee & Certified Copy

## 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	: PHILIPPE CHOW BOCA, L.L.C.
2. (a) Principal office address of limited	liability company: 200 E. PALMETTO PARK ROAD
(Note: MUST BE STREET AD	DRESS) BOCA RATON, FL 33432
(b) Mailing address of limited liability	y company: 200 E. PALMETTO PARK ROAD
(Note: MAY BE POST OFFICE	BOCA RATON, FL 33432
05/11/2011	L11000055769
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered	Office shown on the records of the Florida Dept. of State:
Registered Agent:	MICHAEL REDA
Registered Office Address:	5875 COLLINS AVENUE PENTHOUSE 3
	MIAMI BEACH, FL 33140
(b) Enter name of <u>NEW Registered A</u> <u>NEW Registered Agent:</u>	Agent and/or NEW Registered Office address:  ANTHONY ACCETTA, ESQUIRE
NEW Registered Office Address: (MUST BE FLORIDA STREET	ADDRESS) LAW OFFICES OF ANTHONY ACCETT (1) 200 S. BISCAYNE BOULEVARD, SUITE (2) MIAMI, FL 33131
Signature of a member or authorized recresentative of a  ANTHONY ACCETTA, ESC  Printed or typed name of signee	QUIRE F STATE
,,	tered agent and agree to act in this capacity. Further agree to relative to the proper and complete performance of my duties, igations of my position as registered agent as provided for in being filed to merely reflect a change in the registered office liability company has been notified in writing of this change.

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

Signature of Registered