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(Re	equestor's Name)			
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PICK-UP	☐ WAIT	MAIL			
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Certified Copies	Certificate	s of Status			
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Special Instructions to	Filing Officer:				

Office Use Only



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SLUMANSSEE, FLORIDA

B. BOSTICK
SEP 6 2011
EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJ					IS LLC
	Name of	Limite	d Liabilit	ty Company	
Dear S	Sir or Madam:				
The er	nclosed Registered Agent/Registered	Office	Change a	and fee(s) are	e submitted for filing.
Please	return all correspondence concerning	g this m	natter to t	he following); ;
	Ani Muradian Name of Person	<u> </u>		_	
	Name of Person				
	Legalzoom.com, Inc.				
	Firm/Company				
					As -
	100 W Broadway Suita 10	Λ			11 SEP +2 SECRETARIA
-	100 W Broadway Suite 10 Address	<u>U </u>		-	\$6 8 7
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					me to it
	Glendale, CA 91210			_	
-	City/State and Zip Code				PH 3: 1
					PH 3: 15
E-	mail address: (to be used for future annual report	notificati	on)	-	
For fu	rther information concerning this mat	ter, ple	ase call:		
	Claire Gutierrez	at (_			962-8600
	Name of Person		A	rea Code & Day	time Telephone Number
	STREET/COURIER ADDRESS:		MAI	LING ADDI	RESS:
	Registration Section Registration Section				
	Division of Corporations Division of Corporations				
	Clifton Building		P.O.	Box 6327	
	2661 Executive Center Circle		Talla	hassee, Floric	ia 32314
	Tallahassee, Florida 32301			•	
	Enclosed is a check for the followi	ng am	ount:		
	\$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:W	ALLY'S WORLD OF WIENERS LLC				
2. (a) Principal office address of limited liability con	mpany:				
(Note: MUST BE STREET ADDRESS)	1340 LINCOLN RD., #706 MIAMI BEACH FL 33139 US				
(b) Mailing address of limited liability company:	1340 LINCOLN RD., #706				
(Note: MAY BE POST OFFICE BOX)	MIAMI BEACH FL 33139 US				
08/15/2011	L11000093665				
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:	RICE, WALTER				
Registered Office Address:	1340 LINCOLN RD. #701 MIAMI BEACH FL 33139 US				
(b) Enter name of <u>NEW Registered Agent</u> and/o <u>NEW Registered Agent</u> : NEW Registered Office Address:					
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1340 LINCOLN RD. #706				
	MIAMI BEACH ,FL33139				
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 operating-agreement of the limited liability company.					
Signature of a member or authorized representative of a member	AH S				
WALTER RICE Printed or typed name of signee					
I hereby accept the appointment as registered agent comply with the provisions of all statutes relative to t and I am familiar with and accept the obligations of Chapter 608, F.S. Or, if this document is being filed address, I hereby confirm that the limited liability con	and agree to act in this capacity. I further agree to he proper and complete performance of my duties, my position as registered agent as provided for in to merely reflect a change in the Fegistered office mpany 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 Agent