L11000117029

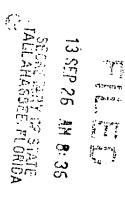
(Requ	uestor's Name)	
(Address)		
(Address)		
(City/	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nar	ne)
,	•	,
(Doci	ument Number)	<u> </u>
(====	<i>,</i>	
Certified Copies	Certificate	e of Statue
Certified Copies	Certificate.	3 0, Olatu3
Special Instructions to Fi	ling Officer:	

Office Use Only



800251965618

09/26/13--01016--008 **25.00





Founded 1910

MARGE KENNEDY PARALEGAL (561) 650-8541 Direct Telephone (561) 822-5531 Direct Facsimile

E-MAIL ADDRESS: mkennedy@shutts.com

MEMORANDUM

VIA FEDEX

TO:

Florida Department of State

Division of Corporations

FROM:

Marge Kennedy

DATE:

September 25, 2013

RE:

Sloan's Franchise LLC

Document Number L11000117029

Enclosed please find Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company for filing regarding Sloan's Franchise LLC. Also enclosed is our check, payable to the Department of State, in the amount of \$25.00 in payment of the filing fee.

Thank you for your assistance. If you have any questions, please call me.

Enclosures

WPBDOCS 8353800 1 12173.0001

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: SLOAN'S FRANCHISE ILC 2. (a) Principal office address of limited liability company: 235A WORTH AVENUE (Note: MUST BE STREET ADDRESS) PALM BEACH, FL 33480 235A WORTH AVENUE (b) Mailing address of limited liability company: PALM BEACH, FL 33480 (Note: MAY BE POST OFFICE BOX) OCTOBER 10, 2012 L11000117029 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: SLOAN KAMENSTEIN Registered Office Address: 235A WORTH AVENUE PALM BEACH, FL 33460 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: SLOAN KAMENSTEIN **NEW** Registered Agent: **NEW** Registered Office Address: 1650 MERCER AVENUE (MUST BE FLORIDA STREET ADDRESS) FL 33401 WEST PALM BEACH 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. 1 6 Signature of a member or authorized representative of a member Clayer, 5 to . . . SLOAN KAMENSTEIN Printed or typed name of signee I hereby accept the appointment as registered agent and agree to act in this capacity? 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.S. Or, if this document is being filed to merely reflect a change in the registered office aderess I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent
SLOAN HAMBUSTEZN

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00