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(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	· #)
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D. BRUCE



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ACCOUNT NO. : 12000000195

REFERENCE: 763317 7779782

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE: August 14, 2013

ORDER TIME : 10:20 AM

ORDER NO. : 763317-005

CUSTOMER NO: 7779782

CHANGE OF AGENT

NAME: THE GRILLE ON LAS OLAS, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Robert Branch -- EXT# 62512

EXAMINER:

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: THE GRILLE ON LAS OLAS, LLC Name of Limite	ed 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 n	natter to the following:			
Angela M. Tarpoff				
Name of Person				
Anderson Real Estate		**1		
Finn/Company		A 100 6	2018 /	-
Suite 700 3805 Edwards Road		発音を	AUG	-
Address		SE(5	
Cindinnati, OH 45209		9FS E-FL€	*	
City/State and Zip Code	 	IATE)RHU/	AM 11: 45	لربيها
atarpoff@anderson-realestate.com			•	
E-mail address: (to be used for future annual report notificati	ion)			
For further information concerning this matter, ple	ease call;			
I.R. Anderson au	513) 241-5800			
Name of Person	Area Code & Dayrime Telephone Number			
STREET/COURIER ADDRESS: Registration Section Division of Corporations	MAILING ADDRESS: Registration Section Division of Corporations			
Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a check for the following ame	ount:			
□ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy			
INHS18 (5/08)				

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.	Nai	me of the limited liability company: THE GRILLE ON	LAS OLAS, LLC	
2.	(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	3805 EDWARDS RD, STE. 700 CINCINNATI, OH 45209	
	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	3805 EDWARDS RD, STE. 700 CINCINNATI, OH 45209	
3.	01 Dat	/11/20 12 e of filing/registration in Florida 4	L12000005331 . Document number	
5.	(a)	Registered Agent and Registered Office shown on the	ne records of the Florida Dept. of State:	
		Registered Agent:	KEVIN BLAIR	
		Registered Office Address:	1849 HIDDEN TRAIL LANE WESTON, FL 33327	2013 A
	(b)	Enter name of NEW Registered Agent and/or NEW	m m	AUG 15 A
		NEW Registered Agent: NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Corporation Service Company 1201 Hays Street	=======================================
		MOST BET CORTON STREET TO BRODE!	Tallahassee	Š
and the the	nfirm d the bility e me	imited liability company is not organized under the la ned that after the change or changes are made, the Flo e business office of the registered agent will be identic y company, it is hereby confirmed that the change(s) imbers of the limited liability company or as otherwise erating agreement of the limited liability company.	rida street address of the registered office eat. Or, in the case of a Florida limited was/yere authorized by an affirmative vote	of
		ey R. Anderson, Tr.		
III con an Cr	here mply d I a napte dres	by accept the appointment as registered agent and ag with the provisions of all statutes relative to the proj on familiar with and accept the obligations of my pos or 608, F.S. Or, if this document is being filed to mero s, I hereby confirm that the limited liability company	ree to act in this capacity. I further agree to per and complete performance of my duties, ifion as registered agent as provided for in ply reflect a change in the registered office has been notified in writing of this change.	o
В	y:	/ 1673 . /	BRANCH ASIT. U.P.	

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

INHS18 (05/08)