## 12000041498

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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L. SELLERS				
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SECRETARY OF STATE ALLAHASSEE, FLORIDA

## **COVER LETTER**

SUBJECT: BAY BAYS CHICKEN & WAFFLE LLC

Name of Limited 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 matter to the following:

ISRAEL JOHNSON

Name of Person

BAY BAYS CHICKEN & WAFFLE LLC

Firm/Company

PO BOX 310

Address

**BOYNTON BEACH FL 33435** 

City/State and Zip Code

israel\_johnson@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ISRAEL JOHNSON

Registration Section

**Division of Corporations** 

TO:

<sub>ar</sub> 561

374-3044

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

**MAILING ADDRESS:** 

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Enclosed is a check for the 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: BAY BAYS CHICKEN & WAFFLE LLC		
2.	(a)	Principal office address of limited liability con (Note: MUST BE STREET ADDRESS)	mpany: 2400 OKEECHOBEE BLVD WEST PALM BEACH FL 33409
	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	PO BOX 310 BOYNTON BEACH FL 33435
_		BER 9, 2013	L12000046498
3.	Dat	e of filing/registration in Florida	4. Document number
5.	(a)	Registered Agent and Registered Office show	wn on the records of the Florida Dept. of State:
		Registered Agent:	JOHNSON, ISRAEL G
		Registered Office Address:	1103 COASTAL BAY BLVD
			BOYNTON BEACH, FL 33435
	(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:		
		NEW Registered Agent:	JOHNSON, ISRAEL G
		NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	
			WEST PALM BEACH FL 33409 ,FL 33409
ar list the the Si	onfirmed the abilities make operature operatur	e business office of the registered agent will be the company, it is hereby confirmed that the char embers of the limited liability company or as o ereding agreement of the limited liability comp the of a member or authorized representative of a member on, ISRAEL G or typed name of signee	, the Florida street address of the registered office e identical. Or, in the case of a Florida limited ange(s) was/were authorized by an affirmative vote of therwise provided in the articles of organ attom or
	$\overline{C}$	ire of Registered Agent	-

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