

L12000 048 598

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

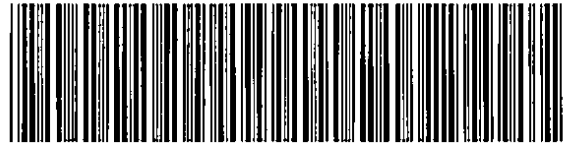
(Business Entity Name)

(Document Number)

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2019 JUL 29 PM 1:51  
SECTION 1  
TALLAHASSEE, FL

AUG -1 2019

C Kinsey

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Cracker Shack II, LLC  
Name of Corporation

DOCUMENT NUMBER: L-12000048598

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kevin Trahan  
Name of Contact Person

Cracker Shack II, LLC  
Firm/Company

3269 S. Graymar Path  
Address

Inverness, FL 34450  
City/State and Zip Code

gatorhunter70@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kevin Trahan at ( 352 ) 601-7647  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Cracker Shack II, LLC
2. The principal office address: 3269 S. Graymor Path  
INVERNESS, FL. 34450
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 4/2/12 Document number: L-12000048598
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Daniel Algor  
5633 W. Nobis Circle  
HOMOSASSA, FL. 34448

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Kevin Trahan  
3269 S. Graymor Path  
INVERNESS, FL. 34450

P.O. Box NOT acceptable

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Ken Al  
Signature of an officer or director

Kevin Trahan  
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I 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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Ken Al  
Signature of Registered Agent

Kevin Trahan  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*

SECRETARY OF STATE  
TALLAHASSEE, FL

2019 JUL 29 PM 1:51

FILED

**Janice A. Warren**  
**Citrus County Tax Collector**  
**210 N. Apopka Ave., Ste. 100, Inverness, FL 34450**

<b>Transaction # 3687083</b>	
Cashier:	CM
Paid By:	CRACKER SHACK II, LLC
Posted Date:	06/26/2019 04:05PM
Received Via:	In Person
Num. Items:	1
Total Tendered:	\$133.00
Receipt #:	010-18-00003937
Batch:	685058
Drawer:	10
Status:	Complete

Receipt				
Item	Details	Effective Date	Due	Paid
FRVIS	Crystal River Batch# 1076644 VIN: FLZBX017A707 Code: RRR	06/26/2019	\$133.00	\$133.00
	Total:		\$133.00	\$133.00
Payment	Details			Paid
PIN Debit	Unknown CC#XXXX-3349 Confirmation number: 02720910882 AID: A0000000980840 TDS: chip Terminal Number: 001 Application Label: US Debit PIN Statement: verified Auth Code: 528315			\$133.00
	Balance:			\$0.00
	Convenience Fee:			\$2.50
	Total Charged:			\$135.50

## BILL OF SALE

Buyer and Sellers agree that the Cracker Shack (boat house) will be sold for \$2000 a share and said buyer will take possession on June 7th, 2019. Buyer and Sellers agree the LLC will be amended with the state.

Buyer signature Ken [Signature]

Sellers signatures

[Signature]  
[Signature]  
[Signature]

99 [Signature]  
[Signature]  
[Signature]