## L12000134440

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
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		COVER LETTER	
	egistration Section ivision of Corporations	 	
SUBJECT	COLORADO STEAKS, LLO	;	
SONOEC .		ne of Limited Liability Company	
Dear Sir o	or Madam:	Ì	
The enclo	sed Registered Agent/Registered Of	fice Change and fee(s) are submitted for	filing.
Please reti	urn all correspondence concerning th	is matter to the following:	
Emily Si	mith		
	Name of Person		
Paracor	p Incorporated		<b>201</b> Tal
	Firm/Company		TAH.
РО Вох	160568		REDAMON
	Address		
Sacram	ento, CA 95816		
	City/State and Zip Code	l	<del></del>
E-ms	ail address: (to be used for future am	nual report notification)	201 TAL
For furthe	r information concerning this matter	, please call:	
Emily Sr	mith	888 280.6563	Zb XSSEE
	Name of Person	Area Code & Daytime	
Ro Di Ci 20	TREET/COURIER ADDRESS: egistration Section ivision of Corporations lifton Building 561 Executive Center Circle allahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	I: 51 DRIOA
E	nclosed is a check for the following	g amount:	
<b>2</b>	\$25 Filing Fee	□ \$55 Filing Fee & Certified	1 Сору
INHS18 (2	/14)	1	

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

I. Na	ame of the limited liability company: COLORADO	STEAK	(S, LLC	
		(h		
2. (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(þ 	;)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	1000 S. Ronald Reagan Blvd	i	1000 S.	Ronald Reagan Blvd
	Longwood, FL 32750		Longwo	od, FL 32750
	10/22/2012		L120001:	34440
3.	Date of filing/registration in Florida	4.		Document number
<b>5</b> ()	B & C CORPORATE SERVICES OF CENTE	RAL FL	I ORIDA	
5. (a)	Registered Agent and Registered Office shown on the records of t	the Florida	Dept. of Stat	<del>-</del> e:
	Registered Office Address	1DDRESS	<u>,                                    </u>	_
	ORLANDO ,FL	32801		<del>-</del> -
(b)	Paracosp Incorporated  Entername of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> 155 Office Plaza Drive, 1st Floor	Office ad	dress:	TALLAHASSEE.
	NEW Registered Office Address:			OF STA
	Tallahassee ,FL	323	1 30ā	RIDA 5
the cha agent v was/we the arti- Signa I here provisi the obt	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liable appropriate of the members of icles of organization or the operating agreement of the ture of a member or authorized representative of a member by accept the appointment as registered agent and agricular of all statutes relative to the proper and complete ligations of my position as registered agent as provided	the regis ability or of the lim limited l  ree to act perform d for in C	stered office ompany, it i nited liability liability con control of the control o	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in appany.  Printed or typed name of signee bacity. I further agree to comply with the duties, and I am familiar with and acception. If this document is being filed.
to mer	ely reflect a change in the registered office address, I ) I in writing of this change.  Milton Vong, Assistant Secre	nereby co	onf <b>(</b> rm that	the limited liability company has been
Signatu	re of the stated Agent	· · · · · · ·		

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