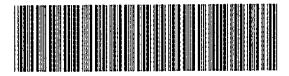
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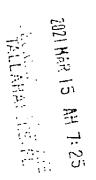
(Requestor's Name)									
(Address)									
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(City/State/Zip/Phone #)									
PICK-UP WAIT MAIL									
(Business Entity Name)									
(Dusiness Littly Name)									
(Document Number)									
Certified Copies Certificates of Status									
Special Instructions to Filing Officer:									

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n RRUC MAY 20 2

		COVER	LETTER						
	istration Section ision of Corporations	d.	**						
SUBJECT:	Famous Recipe Group, LLC								
	Name of Limited Liability Company								
Dear Sir or N	Madam:								
The enclosed	d Registered Agent/Registered C	Office Change and	fee(s) are submitted for filing.						
Please return	n all correspondence concerning	this matter to the	following:						
			S						
Charles Coop	per								
	Name of Person		<u> </u>						
Famous Raci	pe Group, LLC								
	Firm/Company		<u></u>						
	r into Company								
1270 North E	glin Parkway, Suite C-14								
	Address		<u> </u>	702					
Shalimar, FL	32579			2021 KAR 15					
-	City/State and Zip Code			5					
chuck.cooper	@famousforchicken.com		i i	7					
E-mail	address: (to be used for future a	nnual report notif	fication)	ب ۱۰۰					
For further in	nformation concerning this matte	er, please call:	ı	_. U					
Charles Coop	er	850 at (344-1130						
-,~	Name of Person	ar (Area Code & Daytime Telephone Numbe	r					
Reg Divi P.O.	istration Section ision of Corporations Box 6327 ahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303						

☐ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

\$25 Filing Fee

Enclosed is a check for the following amount:

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.

(a)	Famous Recipe Group, LLC Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(b) Famous Recipe Group, LLC					
v- ,			\-\ /-\	Mailing address of Marian (Note: Marian)	of limited liabi BE POST OFF		-	
	1270 North Eglin Parkway, Suite C-14		1270 N	orth Eglin Parkwa	y, Suite C-14			
	Shalimar, FL, 32579		Shalima	ar, FL 32579				
	03/12/2013		L130000	37358				
(a)	Date of filing/registration in Florida Powell, Richard H.	4.		Document nu	ımber			
(**)	Registered Agent and Registered Office shown on the records Powell, Richard H.	of the Flor	ida Dept. of S	State:				
	Registered Office Address (MUST BE FLORIDA STREE 92 Eglin Parkway NE	T ADDRE	<u>(S.S.)</u>		£.	20		
	Fort Walton Beach,	L_32548			TALL	2021 Histor	-32] 1	
(b)	Charles Cooper					5		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u> Charles Cooper	ed <u>Office</u>	<u>address</u> :		() 31 	AM 7: 25	: (434	
	NEW Registered Office Address:				· r	, 51		
	1270 North Eglin Parkway, Suite C-14							
	Shalimar , 1	L						
ange ent v is/we arti	imited liability company is not organized under the lor changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited attended by an affirmative vote of the members cles of organization or the operating agreement of th	e registo iability of the l e limited	cred office company, i mited liab l liability c	and the business it is hereby confi- ility company or company.	office of the rmed that th as otherwise	e registe e change provide	red	
Signat	and the of a member or authorized representative of a member	_	2-110 H P	Printed or types	i name of sign	e e		
ierel oviși	by accept the appointment as registered agent and a ons of all statutes relative to the proper and complet igations of my position as registered agent as provid- tyrefleof a glange in the registered office address.	rea to a	et in this e	anasin I fumba	w a a u a a a a a		th the accept	

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

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