4/3000053956

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COVER LETTER

TO: Registration Section **Division of Corporations**

BAY BAYS CHICKEN AND WAFFLES NUMBER TWO 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 AND WAFFLES NUMBER TWO LLC

Firm/Company

PO BOX 310

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

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

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 liability company submits the following state agent, or both, in the State of Florida.	.416 or 608.508, Florida Statutes, the undersigned limited tement in order to change its registered office or registered
1. Name of the limited liability company: B	AY BAYS CHICKEN AND WAFFLES NUMBER TWO LLC
2. (a) Principal office address of limited lial (Note: MUST BE STREET ADDR	
(b) Mailing address of limited liability co	
SEPTEMBER 9, 2013	L13000053956
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Off	ice shown on the records of the Florida Dept. of State:
Registered Agent:	JOHNSON, ISRAEL G
Registered Office Address:	1558 PALM BEACH LAKES BLVD 5 WEST PALM BEACH, FL 33401
(b) Enter name of <u>NEW Registered Age</u> <u>NEW Registered Agent:</u>	ent and/or NEW Registered Office address: JOHNSON, ISRAEL G
NEW Registered Office Address: (MUST BE FLORIDA STREET AD	DDRESS) 1558 PALM BEACH LAKES BLVD 5 WEST PALM BEACH, FL 33401 WEST PALM BEACH FL ,FL 33401
confirmed that after the change or changes are	zed under the laws of the State of Florida, it is hereby re made, the Florida street address of the registered office at will be identical. Or, in the case of a Florida limited the change(s) was/were authorized by an affirmative vote of or as otherwise provided in the articles of organization or ty company.
JOHNSON, ISRAEL G Printed or typed name of signee	
LONG VOX	ed agent and agree to act in this capacity. I further agree to ative to the proper and complete performance of my duties, tions of my position as registered agent as provided for in ing filed to merely reflect a change in the registered office bility company has been notified in writing of this change.
Signature of Registered Agent	

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