Division of Corporations

Page 1 of 2

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SAUL, EWING, ARNSTEIN & LEHR,

Account Number : I20060000021 : (561) 333-9900 Phone

Fax Number : (561)655-5551

**Enter the email address for this business entity to be used for fut annual report mailings. Enter only one email address please. **

Email Address:

Dana.Walkup@Saul.com

LLC REGISTERED AGENT CHANGE SOUTHERN STEAK HOUSE, LLC

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3. PRATHET

Electronic Filing Menu

Corporate Filing Menu

Help

	.5	COVER LE	ETTER	ø			
	Registration Section Division of Corporations						
SUBJE(SOUTHERN STEAK HOUS	E, LLC					
GO DO E.	Name of Limited Liability Company						
Dear Sir	r or Madam:						
The enc	losed Registered Agent/Registered Off	fice Change and t	fee(s) are subm	itted for filing.			
Please r	cturn all correspondence concerning th	is matter to the f	ollowing:				
Antoin	ette Theodossakos						
	Name of Person		_				
Saul E	wing Amstein & Lehr, LLP						
·	Firm/Company						
515 No	orth Flagler Drive, Suite 1400						
	Address		_				
West F	Palm Beach, Florida 33401						
	City/State and Zip Code						
antoin	ette.theodossakos@saul.com						
E-	mail address: (to be used for future and	nual report notifi	cation)				
For furt	her information concerning this matter	, please call:					
Antoin	ette Theodossakos	561 at (833-9800)			
	Name of Person		Area Code &	Daytime Telephone Nur	mber		
	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	□ \$5	5 Filing Fee &	Certified Copy			
INHS18	(2/14)						

. . .

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT O'R 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.

1. Name of the limited liability company: SOUTHERN STEAK HOUSE, LLC						
2. (a)		(b)				
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OF FICE BOX)			
	8199 Southern Boulevard	8199	9 Southern Boulevard			
	West Palm Beach, FL 33411	Wes	st Palm Beach, FL 33411			
	05/21/2013	L130	00074325			
3.	Date of filing/registration in Florida		Document number			
	Scott J. Lizza					
5. (a	Registered Agent and Registered Office shown on the records of	the Florida Dept. o	of State:			
			of State:			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
	970 Congress Avenue		HA -1			
	West Palm Beach , FI	33409	W-7 AM 9			
	Antoinette Theodossakos		9: 25 E. FL			
(b)	(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:					
	Saul Ewing Arnstein & Lehr, LLP					
	NEW Registered Office Address:					
	515 North Flagler Drive, Suite 1400					
	West Palm Beach Fi	_{L.} 33401				
sign Sign I her provi the or to me notiff	limited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited I were authorized by an affirmative vote of the members tiples of organization or the operating agreement of the nature of a member or authorized representative of a member reby accept the appointment as registered agent and agricultures of all statutes relative to the proper and complete bligations of my position as registered agent as provided in writing of this change.	of the registered liability compan of the limited lie limited liability Scott J.	is sangein. I therefore agree to comply with the			