Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

Electronic Filing Cover Sheet

(((H14000291311 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BUSINESS FILINGS Account Number : 105256001620

Phone : (608)827-5300

Fax Number : (603)827-5501

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

agent a bizalinas.co

the displacement of the constraint model and the section with the order of the constraints.

LLC REGISTERED AGENT CHANGE GIRAFFAS SEMINOLE TOWNE, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Monu

Help

https://efile.sunbiz.org/scripts/cfilcovr.exe

12-31-14

12/17/2014



December 24, 2014

FLORIDA DEPARTMENT OF STATE

Division of Corporations

GIRAFFAS SEMINOLE TOWNE, LLC 1444 BISCAYNE BLVD.

SUITE 216

MIAMI, FL 33132US

SUBJECT: GIRAFFAS SEMINOLE TOWNE, LLC

REF: L13000104760

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Darlene Connell Regulatory Specialist III FAX Aud. #: H14000291311 Letter Number: 814A00027214



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

Pursuant to the provisions of sections 605.0114. 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. N	ame of the limited liability company: GIRAFFAS SE	MINOLE TOWNE, LLC	i		
	Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)		F F-T		
(Ъ) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1444 Biscayne Blvd Spite 216 Miami, Florida 33132	80 FF		
7/24/2	013	L13000104760	‡. 22		
3. D	ate of filing/registration in Florida	4. Document number			
5. (8	a) Registered Agent and Registered Office shown o	n the records of the Florida D	Dept. of State:		
.,	Registered Agent:	ZAYAS MORILLAS, LLC			
	Registered Office Address:	6303 BLUE LAGOON DRIV MIAMI, FL 33126	6303 BLUE LAGOON DRIVE, SUITE 400 MIAMI, FL 33126		
	·				
(b	Enter name of <u>NEW Registered Agent</u> and/or N	EW Registered Office addr	ess:		
	NEW Registered Agent:	Business Filings Incorporated	Business Filings Incorporated		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	NEW Registered Office Address:	515 E. Park Avenue			
	Tallahassee	FI_32301			
confi and t liabil the n the o	e limited liability company is not organized under the rimed that after the change or changes are made, the he business office of the registered agent will be idelity company, it is hereby confirmed that the change numbers of the limited liability company or as other perating agreement of the limited liability company.	Florida street address of the entical. On in the case of a Flash was/were authorized by an wise provided in the articles of the case of a flash was provided in the articles.	registered office lorida limited 1 affirmative vote of		
Ana I	Paula Oliviera	•			
	ed on typed maine of signee	_			
I her company of Charles	reby accept the appointment as registered agent and sly with the provisions of all statutes relative to the law fauthar with and accept the obligations of my per 603, F.S. Or, if this document is being filed to less. I hereby confirm that the limited liability compared to the confirmation of the confirmat	•	. I further agree to tance of my futtes, as provided for in a registered office ing of this change.		
Signa	Mark Williams, AVP Business Filings Incor	•			
	Division of Corporations, P.O. Box	6327, Taliahassee, FL 3231	14		

H14000291311 3

FILING FEE: \$25.00