## 115000100938

(Re	questor's Name)					
(Ad	dress)					
(Ad	dress)					
(City/State/Zip/Phone #)						
PICK-UP	☐ WAIT	MAIL				
(Bu	siness Entity Nar	me)				
(Document Number)						
Certified Copies	_ Certificate:	s of Status				
Special Instructions to	Filing Officer:					

Office Use Only



100327524291

04/15/19--01028--014 \*\*25.00

TILEL 19 APR 15 PH 2:07 SECKELVRY OF STATE ALLAHASSEE, FLORIDA

APR 22 2019 F&CHROEDER

## COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Paella King			
Name	of Limited Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office	e Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this t	matter to the following:		
Mary Freitas			
Name of Person			
Paella King			
Firm/Company			
3250 N US Highway 1			
Address	<del></del>		
Fort Pierce, FI 34946			
City/State and Zip Code			
bonnerbar1@gmail.com			
E-mail address: (to be used for future annua	l report notification)		
For further information concerning this matter, ple	lease call:		
Suzanne Grant	772 408-2444		
Name of Person	Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations	MAILING ADDRESS: Registration Section Division of Corporations		
Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following an	mount:		
☑ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy		
INHS18 (2/14)			

## 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.

1. N	ame of the limited liability company: Paella King						
2. (a)							
(a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(0)	(b) Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)				
	19900 Mona Road Suite 105		473 Wate	ers Drive			
	Tequesta, fl 33469		Ft Pierce	, Fl 34946			
	June 10, 2015	L	1500010	0938			
3.	Date of filing/registration in Florida	4.	<u> </u>	Document nu	mber		
5. (a)	Bonner Mobile Bar Service LLC						
J. (11)	Registered Agent and Registered Office shown on the records	of the Florida	Dept. of State				
	Bonner Mobile Bar Service LLC						
	Registered Office Address [MUST BE FLORIDA STREE	T ADDRESS)					
	473 Waters Drive				Z K		
	Fort Pierce	34946			ECRE LLAH	19 APR	•=====
					IAS.	א ו-2 אור	=
(b)					SA En S		
	Enter name of NEW Registered Agent and/or NEW Register	ed Office add	ress:		E of S	P	
	Mary Freitas				11807 11815	2:0	
	NEW Registered Office Address:				A	7	
	3250 N US Highway 1						
	Fort Pierce i	FL_34946					
the cha agent was/w	limited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the regist liability cor s of the limi	tered office mpany, it is ted liability	and the busing hereby configured to the configure of the company or a second configure of the company or a second configure of the configure o	ness office or rmed that the	of the i	registered nge(s)
W	lary Freitas uure of a member or authorized representative of a member	Mary	/ Freitas				
				Printed or typed			
provisi the obj to <b>mer</b> notifie	by accept the appointment as registered agent and a ions of all statutes relative to the proper and comple ligations of my position as registered agent as provid ely reflect a change in the registered office address, d in writing of this change.	igree to act le performa ded for in C I hereby co	in this capa nce of my a hapter 605, nfirm that t	icity. I further luties, and I a , F.S. Or, if th the limited liad	r agree to c im familiar his docume bility comp	comply with a nt is be any ho	with the nd accept zing filed is been
Mi	ing Freitas proof Registered Agent						
viBirati)	nym registered right						

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