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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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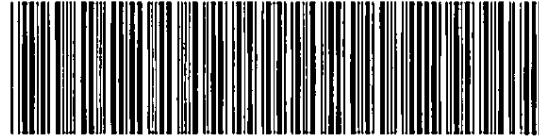
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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AUG 23 2019



Patricia Lebow, Partner
T (561) 366-5302
patricia.lebow@nelsonmullins.com

NELSON MULLINS BROAD & CASSEL
ATTORNEYS AND COUNSELORS AT LAW

One North Clematis Street Suite 500
West Palm Beach, FL 33401
T 561.832.3300 F 561.655.1109
nelsonmullins.com

August 15, 2019

VIA FEDEX OVERNIGHT

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

***Re: Statement of Change of Registered Office or Registered Agent or Both for
Limited Liability Company***

Dear Sir/Madam:

Enclosed please find 2 fully completed Statements of Change of Registered Office or Registered Agent or Both for a Limited Liability Company together with a cover letter and a filing fee of \$25.00 for each one of the following LLC's:

- 1) RED RED ROBIN LLC
- 2) TABLE 26, LLC

Please process and send me the confirmation of resignation from the above 2 entities.

If you have any questions regarding the enclosed, please feel free to contact me. My cell phone is (561) 762 -2402.

Thank you for your assistance in this matter.

Sincerely,

Patricia Lebow, President
Patricia Lebow P.A.

PL/bk
Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RED RED ROBIN 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:

Jim Perkins

Name of Person

Corporate Creations Network, Inc.

Firm/Company

11380 Prosperity Farms Road #221E

Address

Palm Beach Gardens, Florida 33410

City/State and Zip Code

jim.perkins@corpcreations.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jim Perkins

561 694-8107
at ()

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

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. Name of the limited liability company: RED RED ROBIN LLC
2. (a) 12300 SUNNYDALE DRIVE (b) 12300 SUNNYDALE DRIVE
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)
WELLINGTON, FL 33414 WELLINGTON, FL 33414

3. 04/25/2016 Date of filing/registration in Florida 4. L16000080849 Document number

5. (a) Patricia Lebow, P.A.
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
ONE N CLEMATIS ST

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
SUITE 500
WEST PALM BEACH, FL 33401

- (b) Corporate Creations Network, Inc.

Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

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