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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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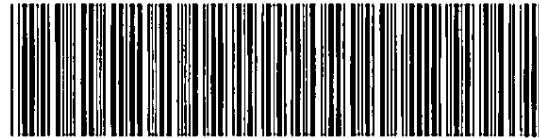
(Business Entity Name)

(Document Number)

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**NELSON MULLINS  
BROAD AND CASSEL**

NELSON MULLINS BROAD & CASSEL  
ATTORNEYS AND COUNSELORS AT LAW

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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.

PI/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 at ( 561 ) 694-8107  
\_\_\_\_\_  
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

**FILED**  
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 TALLAHASSEE, FLORIDA

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.

*Patricia Lebow, P.A.* Patricia Lebow, P.A.  
 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.*

*Patricia Lebow, P.A.*  
 Signature of Registered Agent