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(Address)				
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COVER LETTER

Registration Section

TO:

INHS18 (2/14)

Division of Corporations					
CRISP RESTAURANT GR	OUP LLC				
Name of Limited Liability Company					
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Of	ffice Change and	fee(s) are submitted for filing.			
Please return all correspondence concerning to	his matter to the	following:			
Harvey Schneider, Esq.					
Name of Person					
NP LAW					
Firm/Company		-			
1300 North Federal Hwy / Suite 106					
Address			TALL SEC		
Boca Raton, FL 33432			FILLED NOV 22 PM 3: 31 CORELISATION STATE LAHASSEE FLORID		
City/State and Zip Code			22 22 8860 8860		
jason.lakow@gmail.com			·		
E-mail address: (to be used for future an	nual report notif	ication)) 2 3		
For further information concerning this matter	r, please call:				
Harvey Schneider, Esq.	561	391-9199			
Name of Person		Area Code & Daytime Teleph	none 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 followin	g 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. Na	ame of the limited liability company: Crisp Restaur	ant Group LLC		
2. (a)	3207 Clint Moore Rd	(b) 3207 Clint Moore Rd		
-· ()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	#205	#205		
	Boca Raton, FL 33496	Boca	Raton, FL 33496	
	8/22/2016	L16000	0157202	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	Jason Lakow			
J. (4)	Registered Agent and Registered Office shown on the records of t	he Florida Dept. of S	State:	
	3815 South Dixie Hwy		•	
	Registered Office Address (MUST BE FLORIDA STREET A	(DDRESS)		
			EGG A T	
	West Palm Beach , FL	33405	N 23	
(b)	Harvey Schneider, Esq.		LED 122 PM	
(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	_ ్రైక్స్ ట	
	1300 North Federal Hwy		ADT 31	
	NEW Registered Office Address:			
	Suite 106		_	
	Boca Raton .FL	33432		
the cha agent v was/wo	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	vs of the State of the registered off ibility company, f the limited liab limited liability of	fice and the business office of the registered it is hereby confirmed that the change(s) ility company or as otherwise provided in	
Signa	ture of a member or authorized representative of member	· · · ·	Printed or typed name of signee	
provisi the obl to merc	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address, I has a change in the registered office address, I has a change.	ee to act in this c performance of n I for in Chapter t iereby confirm th	apacity. I further agree to comply with the ny duties, and I am familiar with and accept 505, F.S. Or, if this document is being filed at the limited liability company has been	
Signatu	re of Registered Agent			

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