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COVER LETTER

то:	Registration Section Division of Corporations		
CITIEN		US 8 LLC	
SUBJ	ECT: Nam	ne of Limited	d Liability Company
Dear S	Sir or Madam:		
The en	nclosed Registered Agent/Registered Off	ice Change :	and fee(s) are submitted for filing.
Please	e return all correspondence concerning th	is matter to	the following:
	JOSE DURAN		
	Name of Person		
	TAX 123 INC		
·	Firm/Company		
1383	35 VILLAGE PARK DRIVE, SUITE	200	
	Address		
ORL	ANDO, FLORIDA 32837		
	City/State and Zip Code		
INF	O@TAX123INC.COM		
	E-mail address: (to be used for future and	nual report n	otification)
For fi	urther information concerning this matter	, please call	:
JOS	E DURAN	407	361-5900
	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	g amount:	
	☑ \$25 Filing Fee		\$55 Filing Fee & Certified Copy



May 16, 2019

GRILL US8 LLC 7130 ALTIS WAY #3 204 ORLANDO, FL 32836 US

SUBJECT: GRILL US8 LLC Ref. Number: L17000203472

Our records indicate the registered agent for the above named limited liability company resigned on December 5, 2018 and that the limited liability company currently does not have a registered agent designated.

Chapter 605, Florida Statutes, requires this office to give 60 days notice of our intent to dissolve a limited liability company for failure to appoint and maintain a registered agent.

This letter is our notice of intent to dissolve the above named limited liability company 60 days from the date of this letter if a registered agent is not properly designated.

Please designate a new registered agent by doing one of the following: 1) complete the enclosed registered agent designation form, 2) file the current year annual report (if applicable) or 3) file an amended annual report (again, if applicable). Each one of these filings must be submitted with the appropriate filing fee.

If you should need any further information, please contact our office at (850) 245-6823.

Gary Blankenbaker Document Specialist Division of Corporations

Letter Number: 119A00009891

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

,	Nio	ame of the limited liability company: 6 mill USB LLC	
۱. ء	(a)	7130 Altic way 10 7130 Altis way	
ú.	(4)	Principal office address of limited liability company: Mailing address of limited hability company: Mailing address of limited hability company:	
		# 3204 32836 # 3204 3283	6
		Orlando, Florida Como Orlando, Florida Como	D'
		10-02-2017 <u>L17000203472</u>	
3.		Date of filing/registration in Florida 4. Document number	
5.	(a)	None (RESIMED)	
٥.	()	Registered Agent and Registered Office shown on the records of the Florida Dept. of State.	
		None	
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	
		None	
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS) None , FL.	
	(b)	TAX 123 INC	
	(0)	Enter name of NEW Registered Agent and/or NEW Registered Office address:	
		13538 Village Park drive	
		NEW Registered Office Address:	
		Suite 200	
		Orlando FL 32837	
Ιí	ihe l	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 of the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

-arizi Ushirobira
Printed or typed name of signee

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 jamiliar 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 hability company has been notified in writing of this change.

Signature of Registered Agent