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(Requestor's Name)							
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(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
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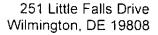
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO.: 120000000195

REFERENCE: 901050 4311639

AUTHORIZATION

COST LIMIT : \$ 25.00

ORDER DATE: November 7, 2017

ORDER TIME: 12:43 PM

ORDER NO.: 901050-015

CUSTOMER NO: 4311639

CHANGE OF AGENT

NAME: ANOTHER BROKEN EGG CAFE OF SANFESTIN, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Roxanne Turner -- EXT#

EXAMINER:

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	me of the limited liability company: ANOTHER BROKE	KEN EG	G CAFE OF	F SANDESTIN, LLC	<u>, </u>		
2.	(a)	600 Grand Blvd, Suite M-209	_ (b)	(b) 600 Grand Blvd, Suite M-209				
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		N	Mailing address of limited (Note: MAY BE POST			
		Miramar Beach, FL 32550	_	Miramar E	Beach, FL 32550			
			-				_	
		October 13, 2017	_	L1700021	2614			
3.		Date of filing/registration in Florida	4.		Document number			
5.	(a)	Ronald E. Green						
		Registered Agent and Registered Office shown on the records of the	e Florida	Dept, of State:	:			
		Registered Office Address (MUST BE FLORIDA STREET AL	DDRESS)			to g		
		600 Grand Blvd, Suite M-209				17 NOV	17	
		Miramar Beach, FL_	32550	 -			_	
	(b)	Corporation Service Company				至	ī	
		Enter name of NEW Registered Agent and/or NEW Registered O	ffice add	ress:		عد جون	じ	
		1201 Hays Street				. 09. . 1		
		NEW Registered Office Address:				ı		
				 -				
		Tallahassee, FL_	32301					
tho ag wa	cha: ent w s/we	mited liability company is not organized under the laws nge or changes are made, the Florida street address of the rill be identical. Or, in the case of a Florida limited liability authorized by an affirmative vote of the members of close of organization or the operating agreement of the liability.	he regist pility cor the limi	tered office npany, it is ted liability	and the business of hereby confirmed to company or as other	fice of the register hat the change(s)		
	Signat	ure of a member or authorized representative of a member	Jona	than Tanen	Printed or typed name of	of signee		
I I pro the to	iereb ovisio obli mere	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pagations of my position as registered agent as provided by reflect a change in the registered office address, I he writing of this change.	priormo	nce of my a hapter 605, nfirm that ti	city. I further agree luties, and I am Iam	e to comply with th	ani	
Si	gnatur	e of Registered Agent Corporation Service Company	BY:		ice President			

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