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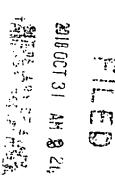
(Requestor's Name)						
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(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
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Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
Special manuctions to 1 ming officer.						

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COVER LETTER .

TO:	Registration Section Division of Corporations					
SUBJE	Chewie's Kitchen LLC					
	Name of Limited Liability Company					
Dear S	ir or Madam:					
The en	closed Registered Agent/Registered Offi	ce Change and fe	e(s) are submitted for filing.			
Please	return all correspondence concerning thi	is matter to the fol	llowing:			
Brynn	ne Farrell					
+	Name of Person					
	· · · · · · · · · · · · · · · · · · ·	, 4				
	Firm/Company					
204 C	Dleander Circle					
	Address					
Pana	ma City Beach, FL 32413					
	City/State and Zip Code					
brynn	e@brynneperry.com					
E	-mail address: (to be used for future ann	ual report notifica	tion)			
For fur	ther information concerning this matter,	please call:				
Brynn	e Farrell	850 _ at (567-0306			
	Name of Person	ı	Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		Regis Divis P.O. 1	LING ADDRESS: stration Section ion of Corporations Box 6327 hassee, Florida 32314			
Enclosed is a check for the following amount:						
	☑ \$25 Filing Fee	\$55	Filing Fee & Certified Copy			

INHS18 (2/14)

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: Chewie's Kitch	nen LL	_C	.C
2. (a	ı) ,		_ (1	b)	b)
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		9952 Hutchinson Blvd., Suite 200			9952 Hutchinson Blvd., Suite 200
		Panama City Beach, FL 32407	_		Panama City Beach, FL 32407
		10/20/2017		Ĺ	L17000217513
3.		Date of filing/registration in Florida	4.	_	Document number
5. (a)	United States Corporation Agents, Inc.			
J. (<i>u ,</i>	Registered Agent and Registered Office shown on the records of the	he Florid	a [a Dept. of State:
		13302 Winding Oak Court			
		Registered Office Address (MUST BE FLORIDA STREET A	DDRES,	S	52
		A			<u> </u>
(b)		Tampa , FL	33612	<u>!</u>	1 0CT 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	. \	Brynne Farrell			
		Enter name of NEW Registered Agent and/or NEW Registered (Office ad	ldr	Idress:
		NEW Registered Office Address:			
		204 Oleander Circle			
		Panama City Beach , FL	3241 3	}	
the cagen was/the a Sign I heaprov the of to monotif	hart we rtig	mited liability company is not organized under the law nge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liar re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the limited of a member or authorized representative of a member on accept the appointment as registered agent and agreement of all statutes relative to the proper and complete particles of my position as registered agent as provided by reflect a change in the registered office address. In a writing of this change.	the regi bility of the lin imited Bry	iste on nit lia yn	stered office and the business office of the registered ompany, it is hereby confirmed that the change(s) nited liability company or as otherwise provided in liability company. //nne Farrell Printed or typed name of signee It in this capacity. I further agree to comply with the