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| (Requestor's Name) | | | | |
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| (Address) | | | | |
| (City/State/Zip/Phone #) | _ | | | |
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| PICK-UP WAIT MAIL | | | | |
| | | | | |
| (Business Entity Name) | | | | |
| | | | | |
| (Document Number) | | | | |
| Certified Copies Certificates of Status | | | | |
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| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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COVER LETTER

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| •TO: Registration Section Division of Corporations | | | | |
|--|---|--|--|--|
| SUBJECT: Fun Fun Asian Bowl LLC Name of Limite | | | | |
| Name of Limite | d 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: | | | |
| Xavier A. Torres | | | | |
| Name of Person | | | | |
| Fun Fun Asian Bowl LLC | | | | |
| Firm/Company | | | | |
| 150 NE 123rd St | | | | |
| Address | | | | |
| North Miami FL 33161 | | | | |
| City/State and Zip Code | | | | |
| chefxaviertorres@gmail.com | | | | |
| E-mail address: (to be used for future annual report n | otification) | | | |
| For further information concerning this matter, please call | | | | |
| Xavier A Torres 787 | 667-4412 | | | |
| 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 | S55 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. N | ame of the limited liability company: Fun Fur | n Asian Bowl LLC | |
|----------------------------|--|---|--|
| 2. (a) | 150 NE 123rd St North Miami El 2316: | 1 (b) | · |
| ~. (u) | Principal office address of limited liability comp (Note: MUST BE STREET ADDRESS) | | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) |
| 3. | 3/16/2019 Date of filing/registration in Florida | | Document number |
| 5. (a) | Xavier A Torres | | |
| (u, | Registered Agent and Registered Office shown on the re 150 NE 123rd St North Miami FL 3316 Registered Office Address (MUST BE FLORIDAS) | 51 | |
| | North Miami | , FL_33161 | |
| | Xavier A. Torres | | <u> </u> |
| (b) | Enter name of NEW Registered Agent and/or NEW Re | evistered Office address: | - \$P 1 |
| | 150 NE 123rd St North Miami FL 3316 | | |
| | NEW Registered Office Address: | | LED MY 7: 07 |
| | North Miami | , FL_33161 | _ |
| the ch agent was/v | limited liability company is not organized under ange or changes are made, the Florida street add will be identical. Or, in the case of a Florida lineare authorized by an affirmative vote of the merioles of organization or the operating agreement | dress of the registered office mited liability company, it mbers of the limited liabili | te and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in impany. |
| Signa | ure of a nember or authorized representative of a member | | Printed or typed name of signee |
| provis the ob to mer | by accept the appointment as registered agent a ions of all statutes relative to the proper and co ligations of my position as registered agent as t ely reflect a change in the registered office add a in writing of this change. | and agree to act in this cap omplete performance of my orovided for in Chapter 60 tress, I hereby confirm that | oacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been |
| Signati | are of Registered Agent | | |
| | Division of Corporations• | P.O. Box 6327• Tallaha JNG FEE: \$25.00 | ssee, FL 32314 |

INHS18 (2/14)