M9000225151

(Requestor's Name)						
(Ad	(Address)					
·	,					
(Address)						
(Cit	ty/State/Zip/Phone	#)				
PICK-UP	☐ WAIT	MAIL				
(D.						
(Bu	isiness Entity Name	e)				
(Document Number)						
Certified Copies	Certificates	of Status				
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Special Instructions to	Filing Officer:					
<u> </u>						

Office Use Only



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2022 JUL 11 AM 11: 47

COVER LETTER

TO:	Registration Section : Division of Corporations				
SUBJI	ECT: A BITE OF MAINE LLC				
JC 1301	Name o	f Limited I	iability Company		
Dear S	ir or Madam:				
The en	closed Registered Agent/Registered Office (Change and	l fee(s) are submitted for filin	g .	
Please	return all correspondence concerning this m	atter to the	following:		
Meliss	sa Jones				
	Name of Person				
ZenBu	siness Inc.			207	
	Firm/Company			7 JUL	
336 E.	College Ave. Suite 301			2022 JUL III ANII TO	•
	Address			SSEE	Î -
Tallaha	issee, FL 32301				թ. լ. 8
	City/State and Zip Code				
ra@zei	nbusiness.com				
E	-mail address: (to be used for future annual	report noti	fication)		
For fur	ther information concerning this matter, ple	ase call:			
Meli	ssa Jones	844 at (493-6249)		
	Name of Person		Area Code & Daytime Te	lephone Number	
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporation The Centre of Tallahase 2415 N. Monroe Street Tallahassee. FL 32303	see	
	Enclosed is a check for the following am	ount:			
	□ \$25 Filing Fee	<u> </u>	55 Filing Fee & Certified Co	ру	

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.

	A DITE (_ A.	A A 1	in in	^
1. N a	ame of the limited liability company: A BITE (<u> </u>	<u>IAI</u>	NE LL	C
2. (a)	5711 22ND STREET WEST		(b)	5711 2	22ND STREET WEST
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			М	failing address of limited liability company. (Note: MAYBE POST OFFICE BOX)
	BRADENTON, FL 34207			BRAD	ENTON, FL 34207
		_			
	09/05/2019		l	_19000)225151
3.	Date of filing/registration in Florida	 4.			Document number
5. (a)	Registered Agents Inc.				
J. (a)	Registered Agent and Registered Office shown on the records of	f the Flo	rida I	Dept. of State:	
	7901 4th St N			•	
	Registered Office Address (MUST BE FLORIDA STREE)	^.ADDR1	<u> </u>		
	STE 300				
	St. Petersburg	L_33702	<u>.</u>		2022
(b)	ZenBusiness Inc				
·	Enter name of NEW Registered Agent and/or NEW Registere	d Office	addr	ress;	ASS: - M
	336 E. College Ave.				HASSEE, FL
	NEW Registered Office Address:				<u> </u>
	Suite 301				
	Tallahassee , F	L_32301	,		
change agent w was/we the arti	imited liability company is not organized under the la or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited la tre authorized by an affirmative vote of the members cles of organization or the operating agreement of the	e registe lability of the li	ered com imit	office and pany, it is b ed liability	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
	Melissa Marie Textor	<u>N</u>	<u>/leli</u>	ssa Mar	rie Textor
	ure of a member or authorized representative of a member				Printed or typed name of signee
provision the obli to mere	by accept the appointment as registered agent and agents of all statutes relative to the proper and complete igations of my position as registered agent as providely reflect a change in the registered office address, I fin writing of this change.	ree to a perfori d for it hereby	ict in man 1 Ch con	this capac ce of my du apter 605, , firm that th	ity. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed e limited liability company has been