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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Ta(O(raft South Florida LLC
Name of Corporation

DOCUMENT NUMBER: <u>1900248260</u>

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Marc Falsetto

Name of Contact Person

Jey Hospitality

Firm/Company

275 Commercial Blvd Suite 303

Address

Lauderdale by the Sea, FL, 33308 City/State and Zip Code

adam@jeygroup.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Adam Snyder

,,954

461-1081

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



March 13, 2020

MARC FALSETTO JEY HOSPITALITY 275 COMMERCIAL BLVD SUITE 303 LAUDERDALE BY THE SEA, FL 33308

SUBJECT: TACOCRAFT SOUTH FLORIDA LLC

Ref. Number: L19000248260

We have received your document for TACOCRAFT SOUTH FLORIDA LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Corporation, but your entity is a Limited Liability Company. Please complete and return the enclosed blank form(s).

You must have a signature on the application.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 620A00005640

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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.

Name of the limited liability company: TACOC	CRAFT SOUTH FLORIDA LLC
275 COMMERCIAL BLVD	(b) 275 COMMERCIAL BLVD
Principal office address of limited liability com (Note: MUST BE STREET ADDRESS	mpany: Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
SUITE 303	SUITE 303
LAUDERDALE BY THE SEA. FL 33308	LAUDERDALE BY THE SEA, FL 33308
10/02/2019	L19000248260
Date of filing/registration in Florida	Document number
FALSETTO, MARC	
Registered Agent and Registered Office shown on the 275 E. COMMERCIAL BLVD.,	records of the Florida Dept. of State:
Registered Office Address (MUST BE FLORIDA SUITE 303	# \frac{125}{25}
LAUDERDALE BY THE SEE	
Enter name of NEW Registered Agent and/or NEW 275 COMMERCIAL BLVD	Registered Office address:
NEW Registered Office Address: SUITE 303	
LAUDERDALE BY THE SEA	, FL_33308
as changed will be identical.	nd the street address of the business office of its registered agent,
authorized by the board, or the orporation	duly adopted by its board of directors or by an officer so has been notified in writing of the change.
Signature of an object of the	MALC Ap (OTTO "(O) Printed or typed name and title
I hereby accept the appointment as registers I further agree to comply with the provision performance of my duties, and Lam familia	red agent and agree to act in this capacity. ns of all statutes relative to the proper and completc ir with and accept the obligation of my position as registered herely to reflect a change in the registered office address, l en notified in writing of this change.
	T/10/20
Signature of Registered Agent	Date