

L19 000 259931

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

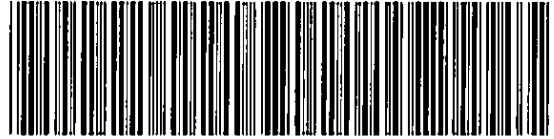
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SEC. OF STATE  
DIVISION OF CORPORATIONS  
20 MAY 22 PM 2:16

RA Change

JUN 02 2020

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## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Tacocraft Of Fort Lauderdale LLC  
Name of Corporation

DOCUMENT NUMBER: L19000259931

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)

FILED  
STATE  
SECRETARY OF  
CORPORATIONS  
20 MAY 22 PM 2:19

For further information concerning this matter, please call:

**Adam Snyder**

Name of Contact Person

**954 461-1081**

at ( )  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 13, 2020

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

SUBJECT: TACOCRAFT OF FORT LAUDERDALE LLC  
Ref. Number: L19000259931

We have received your document for TACOCRAFT OF FORT LAUDERDALE 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: 420A00005638

2020 MAR 13 PM 1:55

**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. Name of the limited liability company: TACOCRAFT OF FORT LAUDERDALE LLC
2. (a) 275 COMMERCIAL BLVD  
Principal office address of limited liability company:  
(Note: MUST BE STREET ADDRESS)  
SUITE 303  
LAUDERDALE BY THE SEA, FL 33308
- (b) 275 COMMERCIAL BLVD  
Mailing address of limited liability company:  
(Note: MAY BE POST OFFICE BOX)  
SUITE 303  
LAUDERDALE BY THE SEA, FL 33308
3. 10/16/2019 Date of filing/registration in Florida
4. L19000259931 Document number

5. (a) FALSETTO, MARC  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

275 E. COMMERCIAL BLVD.,

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

SUITE 303

LAUDERDALE BY THE SEE, FL 33308

- (b) FALSETTO, MARC

Enter name of NEW Registered Agent and/or NEW Registered Office address:

275 COMMERCIAL BLVD

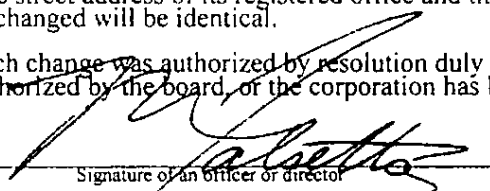
NEW Registered Office Address:

SUITE 303

LAUDERDALE BY THE SEA, FL 33308

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

MARC FALSETTO - CEO  
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

  
Signature of Registered Agent

5/10/16  
Date

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

FILED  
STATE DEPT. OF STATE  
MAY 22 PM 2:10