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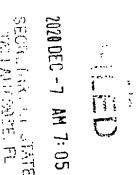
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Special Instructions to	Filing Officer:	





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COVER LETTER

TO: Registration Section Division of Corporations	•
SUBJECT: DANIMADE KITCHEN, LLC	
Name of Lin	nited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Chan	ge and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	to the following:
JASON G BLILIE	
Name of Person	
THE LAW OFFICE OF JASON G. BLILIE, PLI	LC
Firm/Company	
429 LENOX AVENUE	
Address	
MIAMI BEACH, FL 33139	
City/State and Zip Code	
JASON@BLILIELAW.COM	
E-mail address: (to be used for future annual repo	rt notification)
For further information concerning this matter, please c	all:
JASON G BLILIE at (8	17) 919-4110
Name of Person	Area Code & Daytime Telephone Number
	•
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations P.O. Box 6327	Division of Corporations
	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, Fl. 32303
Enclosed is a check for the following amount	t:
\$2\$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.

a) 429 LENOX AVENUE		(b) 429 LENOX AVENUE Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
Principal office address of limited (Note: MUST BE STREET				
MIAMI BEACH, FL 33139			MIAMI BEACH, FL	. 33139
01/02/2020	-	— - L:	20000008682	
Date of filing/registration	in Florida	4.	Document n	umber
(a) BLILIE LAW				
Registered Agent and Registered Office sh	nown on the records of	the Florida D	ept. of State:	
350 Lincoln Rd				
Registered Office Address (MUST BE	FLORIDA STREET	ADDRESS)		€ ~
				: —
Second Floor				028 DI
Second Floor Miami Beach	, FI.	33139		2028 DEC -7 SECAL AND
Miami Beach	, FL			1
Miami Beach		33139	<u></u>	1
Miami Beach b) JASON G BLILIE	nd/or <u>NEW Registered</u>	33139 Office addre	<u></u>	
Miami Beach b) JASON G BLILIE Enter name of NEW Registered Agent and	nd/or <u>NEW Registered</u>	33139 Office addre	<u>25S:</u>	1
Miami Beach b) JASON G BLILIE Enter name of NEW Registered Agent an THE LAW OFFICE OF JASO	nd/or <u>NEW Registered</u>	33139 Office addre	<u></u>	1

was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company

Signature of a member or authorized representative of a member

Printed or typed name of signee

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent