120000261783

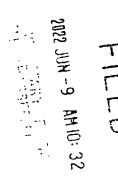
(Requestor's Name)							
(Ac	ldress)						
(Address)							
(Cit	ty/State/Zip/Phone	9 #)					
PICK-UP	MAIT	MAIL					
	<u>-</u>						
(Bu	isiness Entity Nan	ne)					
(Do	ocument Number)						
	ocument Number)						
Certified Copies	Certificates	s of Status					
Canada Instructions to	Fili Officer						
Special Instructions to	Hilling Onicer:						
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Office Use Only



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2022 JUN -9 PM 3: 31

A RAMSEY JUN 1 0 2022 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195
REFERENCE 734514 8347875
AUTHORIZATION THE ME
COST LIMIT : \$ 35.00
ORDER DATE : June 9, 2022
ORDER TIME : 2:39 PM
ORDER NO. : 734514-005
CUSTOMER NO: 8347875
CHANGE OF AGENT
NAME: AJ CULINARY HOLDINGS LLC
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY
XX PLAIN STAMPED COPY
CONTACT PERSON: Eyliena Baker EXT#
•
EXAMINER:

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: AJ CULINARY	HOLDI	VGS	LLC		
2. (a)						
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0).	:	Mailing address o	of limited liability company: SE POST OFFICE BOX)
	126 NE 2ND ST			126 NE 21	ND ST	
	BOCA RATON, FL 33432		-	BOCA RA	TON, FL 3343	32
	06/12/2020		L:	20000261	783	
3.	Date of filing/registration in Florida	4.	_	 .	Document nur	mber
5. (a`						
J. (u,	Registered Agent and Registered Office shown on the records of LANDI, ANGELO	f the Flori	da D	ept. of State	- ::	
	Registered Office Address	ADDRES	<u></u>		-	0.3
	BOCA RATON	L_33432			-	2022 JUN
(b)	Enter name of NEW Registered Agent and/or NEW Registered Corporation Service Company	d Office a	ddro	ess:	-	FILED 22 JUN -9 AM IO: 32
	NEW Registered Office Address:					
	1201 Hays Street					. , ,
	Tallahassee, FI	32301				
change agent v was/w	imited liability company is not organized under the large or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lighter authorized by an affirmative vote of the members of cless of organization or the operating agreement of the	register ability c of the lir	red o omp nite	office and pany, it is d liability	the business of hereby confirmation or a	office of the registered med that the change(s)
/S/ Iva	an Soto	lva	n S	oto, Autho	orized Signer	
Signa	ture of a member or authorized representative of a member				Printed or typed i	name of signee
provisi The obl To mere	hy accept the appointment as registered agent and agrions of all statutes relative to the proper and complete igations of my position as registered agent as provide ly reflect a change in the registered office address, I it in writing of this change.	ree to ac perform d for in hereby c	t in lanc Cha lonfi	this capac te of my di upter 605, irm that th	city. I further luties, and I am F.S. Or, if thi he limited liabi	agree to comply with the 1 familiar with and accept is document is being filed ility company has been
Signatu	Linace C-Kubiy re of Registered Agent	Gı	ace	E. Kirby.	, Asst. Vice Pr	resident