496089

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





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COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: Miami Subs Corp				
Name of Corporation				
DOCUMENT NUMBER: L96089				
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:				
Bernard H Vogel				
Name of Contact Person				
Miami Subs Corp				
Firm/Company				
901-A Clint Moore Road				
Address				
Boca Raton, FL 33487				
City/State and Zip Code				
shari@miamisubs.com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call: Bernard H Vogel 395-8103				
Bernard H Vogel Name of Contact Person Name of Contact Person Area Code & Daytime Telephone Number				
Name of Contact Ferson Area Code to Daytime Telephone Number				
Enclosed is a \$35.00 check made payable to the Department of State.				
Mailing Address: Street Address: Amendment Section Amendment Section				
Division of Corporations Division of Corporations				
P.O. Box 6327 Clifton Building				
Tallahassee, FL 32314 2661 Executive Center Circle				

Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0302, 617.0; ange is submitted for a corporation orgo er to change its registered office or regi	unized under the laws of the State of	Florida
1. The name of	the corporation: Miami Subs Corp		
2. The principal	office address: 901-A Clint Moo		
	Boca Raton, FL 3	33487	
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification: 8/28/1990	Document number: L960	89
	d street address of the current registered rtment of State: (If resigned, enter resig		vith the
	Bernard H Vogel		
	6300 NW 31st Avenue		
	Fort Lauderdale, FL 33309		THE SEP
6. The name and (if changed):	d street address of the new registered ag	ent (if changed) and /or registered o	ffice
	Bernard H Vogel		
	901-A Clint Moore Road		PM 3: 84
		OT acceptable	1>
	Boca Raton, FL 33487		-
The street address changed will	ess of its registered office and the stree be identical.	t address of the business office of i	ts registered agent,
Such change was authorized by it	as authorized by resolution duly adopte the board or the corporation has been n	ed by its board of directors or by an otified in writing of the change.	officer so
		Bernard H Vogel	
•	re of an officer of director	Printed or typed name and ti	tle
l further agrée i performance of	the appointment as registered agent a to comply with the provisions of all standard distance and familiar with and is document is being filed merely to rether the corporation has been notified	itutes relative to the proper and con accept the obligation of my positio	nplete n as registered ce address, l
/	PX-	August 27, 2018	
{\	nature of Registered Agent	Date	
If signing on be	half of an entity:		
Bernard H \			
Tv	vped or Printed Name		

* * * FILING FEE: \$35.00 * * *