

M04000002544

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

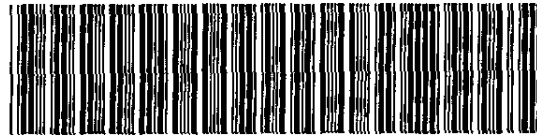
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

J. BRYAN JUN 23 2005

J. BRYAN JUL 25 2005

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Noble Casual Dining 1, LLC
(Name of corporation)

DOCUMENT NUMBER: M 04000002544

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:

Harry W. Noble
(Name of contact person)

Noble Food Service
(Firm/Company)

1672 Highway 1 South
(Address)

Greenville, MS 38701
(City/state and zip code)

For further information concerning this matter, please call:

Harry W. Noble at (601) 334-3018
(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
409 E. Gaines Street
Tallahassee, FL 32399

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TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

June 23, 2005

HARRY W. NOBLE
NOBLE FOOD SERVICE
1672 HIGHWAY 1 SOUTH
GREENVILLE, MS 38701

SUBJECT: NOBLE CASUAL DINING 1, LLC
Ref. Number: M04000002544

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2005 JUL 25 PM 2:18
TALLAHASSEE, FLORIDA

We have received your document for NOBLE CASUAL DINING 1, 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):

You completed the wrong form

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6043.

Joey Bryan
Document Specialist

Letter Number: 705A00042913

*Please see attached
Judy Morzante
Noble Casual Dining*

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR
BOTH FOR LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 608.416 or 608.508, 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. The name of the limited liability company is: NOBLE CASUAL DINING 1, LLC
2. The mailing address of the limited liability company is : 1672 HWY. 1 SOUTH,
GREENVILLE, MS. 38701
3. Date of filing/registration in Florida 6/28/04
4. Document number M04000002544
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Name

CT Corporation

Address

1200 S. Pine Island Road, Plantation Fl. 33324

City, State and Zip

6. The name and address of the new registered agent and/or office:

Greg Ellis

Name

11402 North 30th. Street

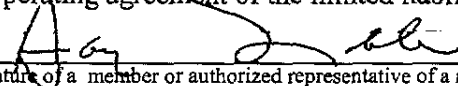
Florida street address (P.O. Box NOT acceptable)

Tampa

FL 33612

City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) 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)

HARRY NOBLE

(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 608, 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)

GREG ELLIS

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