

MI2000002197

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

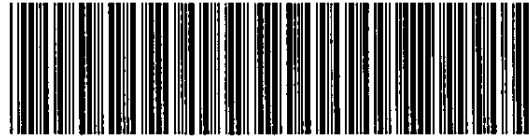
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

W. Culligan



**NRAI  
CORPORATE  
SERVICES**

*Formerly Premier Corporate Services, Inc.*

September 21, 2012

**VIA REGULAR MAIL**

Division Of Corporations  
Florida Department Of State  
PO Box 6327  
Tallahassee, FL 32314

**Re: LFP Churro Miami, LLC  
LFP Lorenzo Restaurant, LLC  
Levy Fairfax LLC**

Dear Sir or Madam:

Enclosed are the forms, in duplicate, necessary to change the registered agent and registered office for the above captioned entities together with a check for the required filing fees.

Please file with your office and return the duplicate copy file stamped as evidence to my attention at the letterhead address.

If you have any questions, please do not hesitate to contact me at [llightholder@nrai.com](mailto:llightholder@nrai.com) or at the number listed below.

Thank you. .

Best Regards,

Laura L. Lightholder

enclosures

**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. Name of the limited liability company: LFP LORENZO RESTAURANT, LLC

2. (a) Principal office address of limited liability company: 1776 COLLINS AVENUE

(Note: **MUST BE STREET ADDRESS**)

MIAMI BEACH, FL 33139

(b) Mailing address of limited liability company:

444 N. MICHIGAN AVENUE

(Note: **MAY BE POST OFFICE BOX**)

SUITE 3500  
CHICAGO, IL 60606

04/19/2012

3. Date of filing/registration in Florida

M12000002197

4. Document number

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

Registered Agent:

CT CORPORATE SYSTEM

Registered Office Address:

1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW Registered Agent:**

NRAI Services, Inc.

**NEW Registered Office Address:**

515 East Park Avenue

**(MUST BE FLORIDA STREET ADDRESS)**

Tallahassee, FL 32301

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.

Sophia Stratton  
Signature of a member or authorized representative of a member

Sophia Stratton

Printed or typed name of signer

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.

by:

Laura Lightholder  
Signature of Registered Agent Laura Lightholder, Assistant Secretary

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

FILING FEE: \$25.00