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## LLC REGISTERED AGENT CHANGE THE HABIT RESTAURANTS, LLC

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## 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.

١.	Na	me of the limited liability company: THE HABIT REST			
2.	(a)	17320 RED HILL AVE., STE 140	ſ	h) 17320 RED	DIIILL AVE., STE 140
	(4)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	. (	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)	
		IRVINE, CA 92614	-	IRVINE. CA	A 92614
		02/19/2015	-	M150000013	152
3. 5. (	(n)	Date of filing/registration in Florida CORPORATION SERVICE COMPANY	4.		Document number
	(α)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State 1201 HAYS STREET		2001 OC	
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
		TALLAHASSEE ,FL 3	2301-	2525	
	(b)	C T Corporation System			FLORH
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered O</u>	)ffice a	ldress:	<u></u> Ω
		NEW Registered Office Address:			
		1200 South Pine Island Road			
		Plantation FL 3	3324		
the age wa	cha ent v s/we	mited liability company is not organized under the laws nge or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited liab are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	he reg sility o the li	istered office ompany, it is nited liability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
		Showy McGinnes	Sh	erry McGinnes	. Asst Secretary
- 5	ignat	ure of a member or authorized representative of a member		<u> </u>	Printed or typed name of signee
pro the to no By:	ovisi obl merc tified Ka	by accept the appointment as registered agent and agre ions of all standes relative to the proper and complete p to the proper and complete p to the proper and complete p to reflect a change in the registered affice address, I he I in writing of this change.  C.T. Corporation System ty Toon, Asst. Secretary	e to a erfori för in ereby i	et in this cape nance of my c Chapter 605 confirm that t	icity. I further agree to comply with the hities, and I am familiar with and accept , F.S. Or, if this document is being filed he limited liability company has been