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(Re	equestor's Name)						
(Ad	ldress)						
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(City/State/Zip/Phone #)							
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(Document Number)							
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CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith janis.smith@cscglobal.com

Date: June 14, 2016

Order#: 172189-044

Re: TWO GUYS FLAMINGO GROUP, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Janis M. Smith c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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.	Na	me of the limited liability company: Two Guys Fla	mingo G	iroL	ip, LLC			<u>-</u>	
2,	(a)	1002 East Newport Center Drive, Suite 200 Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(b)		ast Newport Center I Mailing address of limited (Note: MAY BE POST	d liability co	ompany	
		Deerfield Beach, FL 33442			Deerfield !	Beach, FL 33442		<u>-</u>	
		12/15/2015		_	M1500001			_	
3.		Date of filing/registration in Florida	4.			Document number			
5.	(a)	NRAI Services, Inc.							
		Registered Agent and Registered Office shown on the records of	of the Flor	ida :	Dept. of State:	:			
		1200 South Pine Island Road							
		Registered Office Address (MUST BE FLORIDA STREE	T ADDRE	SS)					
		Plantation , I	FL <u>333</u>	<u>24</u>			=		
	(b)	Corporation Service Company						6	
	(0)	Enter name of NEW Registered Agent and/or NEW Register	ed Office	add	ress:	•		NOF	
							SSV	911	نسمتنون ماستنده ماستنده
		1201 Hays Street				_	Ĕ Ĕ		ž Ž
		NEW Registered Office Address:				•	<u> </u>	3	111
							0.5		Court
						•	100	Ø	
		Tallahassee,	FL <u>323</u>	01		_	,-		
th ag w:	e cha ent r as/w	imited liability company is not organized under the ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member icles of organization or the operating agreement of the contraction of the operating agreement of the contraction of the operating agreement of the contraction o	of the re liability s of the l	gis co: imi	tered office mpany, it is ited liability	e and the business of s hereby confirmed to y company or as oth	ffice of th that the cl	e regi: hange(stered s)
					<u>U</u>	SETH COHEN.	, Authorized	d Perso	n
	•	sture of a member or authorized representative of a member				Printed or typed name	of signee		
th to no	ovis e ob mer otifie	by accept the appointment as registered agent and a ions of all statutes relative to the proper and completing the statutes relative to the proper and completing the statutes relative to the proper and completing the statute of the	ete perjoi ided for i I hereby	n C	ince of my c Chapter 605 onfirm that i	awaes ana camaan	unar wun cument is company	. (4) 1(4 (46.66.671
3	iguau	re of Registered Agent Corporation Service Company	y <i>B1</i> :	. 31	ace D. All	by, nost, vice fie	งอโกษแก		

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

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1.	Na	me of the limited liability company: Two Guys Flam	ningo G	rοι	up, LLC				
2.	(a)	1002 East Newport Center Drive, Suite 200	4	(b)	1002 E	East Newport Center (Drive, Su	ite 200	
		Principal office address of limited liability company:	······	` '		Mailing address of limited			
		(Note: MUST BE STREET ADDRESS)				(Note: MAY BE POST	<u>OFFICE</u>	BOX)	
		Deerfield Beach, FL 33442	_		Deerfield	Beach, FL 33442			
		12/15/2015	_	_	M150000	10121			
3.		Date of filing/registration in Florida	4.			Document number			
5.	(a)	NRAI Services, Inc.			_				
		Registered Agent and Registered Office shown on the records of	the Flori	da l	Dept. of Stat	e:			
		1200 South Pine Island Road							
		Registered Office Address (MUST BE FLORIDA STREET)	ADDRES	<u>{}}</u>		-			
						-	<u></u>	6	
		Plantation , FL	3332	24		_	差别	Ī	:
							ASS	91 NOF	21 stage;
	(b)					-	333		į
		Enter name of NEW Registered Agent and/or NEW Registered	Office a	<u>dd</u>	<u>ress</u> :			3	17
		4004 11-1-01-1							Annual Control
		1201 Hays Street NEW Registered Office Address:				-	8	<u>ශ</u> යා	
		11277 Registred Office Address.					,25		
						-			
		Tailahassee .FL	<u>3230</u>	11					
						-		_	
the	ine n e cha	mited liability company is not organized under the lav nge or changes are made, the Florida street address of	vs of the	rist	State of Fl tered offic	orida, it is hereby con e and the business off	dirmed th	tat afte e regist	r ered
ag	ent w	vill be identical. Or, in the case of a Florida limited lia	ability o	cor	mpany, it i	s hereby confirmed th	hat the ch	ange(s)
wa the	is/we e arti	re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	of the lin limited	mi' Lli:	ted liabilit ability cor	y company or as othe noany.	rwise pro	ovided i	in
						•	A 4		
-	Signat	ure of a member or authorized representative of a member	_			SETH COHEN, Printed or typed name or	f signee	Person	
I	herel	ny accept the appointment as registered agent and agr	ee to a	ct i	in this cap	acity. I further agree	to comp	lv with	the
pr the	ovisi: ≥ obl.	py accept/he appointment as registered agent and agr ons of all statutes relative to the proper and complete gations of my position as registered agent as provide	perfori d for in	na C	nce of mŷ hapter 60:	duties, ánd Í am fami. 5. F.S. Or. if this doc	liar with ument is	ánd ac beine f	cept
lo no	mere tified	gations of my position as registered agent as provide ly reflect a change in the registered office address, I l I in writing of this change.	hěreby	CO	nfirm that	the limited liability co	ompany l	ras bee	n
	: 90	Drace C. Kubi							
Si	gnatu	e of Registered Agent Corporation Service Company	BY:	Gr	ace E. Ki	rby, Asst. Vice Pres	ident		
		•							

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