

4/8/2020

Division of Corporations

Florida Department of State

Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : 120000000195
Phone : (850)521-0821
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**LLC REGISTERED AGENT CHANGE
BISTREAU BROTHERS RESTAURANTS, LLC**

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H20000104486 3**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. Name of the limited liability company: BISTREAU BROTHERS RESTAURANTS, LLC

2. (a) 207 VILLAGE LANE (b) Same
Principal office address of limited liability company Mailing address of limited liability company
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

SOUTHAMPTON, NJ 08088

02/22/2019

M19000002119

3. Date of filing/registration in Florida

4. Document number

5. (a) NISHAD KHAN, P.L.
Registered Agent and Registered Office shown on the records of the Florida Dept. of State

617 E. COLONIAL DR

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

ORLANDO, FL. 32803

(b) Corporation Service Company
Enter name of NEW Registered Agent and/or NEW Registered Office address.

1201 Hays Street

NEW Registered Office 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.

Craig W. Colby
Signature of a member or authorized representative of a member

CRAIG W. COLBY

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 605, 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.

Kadesha Roberson
Signature of Registered Agent Corporation Service Company

BY: KADESHA ROBERSON, ASST. VICE PRESIDENT

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

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