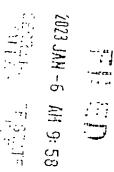
## M21660004497

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certificates of Status					
Special Instructions to Filing Officer:					

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JAN - 9 2023

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195					
REFERENCE : 310922 7539539					
AUTHORIZATION :					
COST LIMIT : 5125 COST LIMIT : 5125 COST					
$\sim$					
ORDER DATE : January 6, 2023					
ORDER TIME : 2:44 PM					
ORDER NO. : 310922-005					
CUSTOMER NO: 7539539					
CHANGE OF AGENT					
NAME: DIMOR EATS LLC					
NAME: DIMOR EATS LLC					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY XX PLAIN STAMPED COPY					
CONTACT PERSON: Eyliena Baker					
EXAMINER'S INITIALS.					

## 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. N	ame of the limited liability company: DIMOR EATS,	LLC	
2. (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  15955 SOUTH AIRPORT RD	(b)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)  777 S FLAGLER DRIVE STE 800 WEST TOWER
	04/16/2021		WEST PALM BEACH, FL 33401 M21000004497
<ul><li>3.</li><li>5. (a)</li></ul>		4.	Document number
	Registered Agent and Registered Office shown on the records of 777 SOUTH FLAGLER DRIVE  Registered Office Address		·
	SUITE 800 WEST TOWER WEST PALM BEACH	33401	202:
(b)			2023 JAN -6
	Corporation Service Company		9:58
	NEW Registered Office Address: 1201 Hays Street	58 	
	Tallahassee, F	L	
change agent v was/w	limited liability company is not organized under the lage or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited light ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	e registered iability con of the limi	ed office and the business office of the registered impany, it is hereby confirmed that the change(s) ited liability company or as otherwise provided in
/	s/Juergen R. Ostertag	Juerg	rgen R. Ostertag, , Authorized Person
Signa	sture of a member or authorized representative of a member		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.

/s/Grace E. Kirby Grace President

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

Signature of Registered Agent