# Division of Corporations Public Access System

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To

Division of Corporations

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From:

Account Name : C T CORPORATION SYSTEM

Account Number : PCA000000023 Phone : (850) 222-1092

Phone : (850)222-1092 Fax Number : (850)222-5428

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# REGISTERED AGENT CHANGE

### **BARBAGE'S ETC. LLC**

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Conservation filling

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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions liability company submits the agent, or both, in the State of	te following statemer	or 608.508, 1 it in order to	Florida Statutes, the change its registered	undersigned limited office or registered
1. The name of the limited l	iability company is:	Babbago's Etc. L	.LC	
2. The mailing address of th	e limited liability cor	npany is :		
2250 William D Tats Ave. Grape	vine, TX 76051	<u> </u>		
1/17/97		M	197006000017	
3. Date of filing/registration	in Florida	4,	Document number	
5. The name of the registered Florida Department of Sta	d agent and the regist	ered office add	iress as shown on the	records of the 03 OCT 15
<u>.c</u>	apitol Corporate Services	Name		8
غاد	333 North Doval Street	ddress		9- 5 13- 12
71	eliabousee BY 37303			
	City, S	State and Zip	*	بي ً
6. The name and address of				5
C,	T Corporation System			: *
		ame	<u> </u>	
<u>12</u> 0	00 South Pine Island Rose	<u>d</u>		
F	Plorida street address	(P.O. Box NO	T acoeptable)	
_P)	antation	FL 33324		
	City, St	ate and Zip		
If the limited liability compactorismed that after the chan and the business office of the liability company, it is hereby the members of the limited light operating agreement of the Operating agreement of the Signature of a namber or authorized	ge or changes are ma e registered agent will y confirmed that the d ability company or a ne limited liability con	de, the Florida the identical. thange(s) was/ s otherwise pro mpany.	t street address of the Or, in the case of a Fl were suthorized by at	registered office londa limited n affirmative vote of
Beniv Kirby, Secretary Managing (Printed or typed name of signee)	Member, Generop, Inc	<u></u>		
I hereby accept the appoints comply with the provisions o and I am familiar with and a Chapter 508, F.S. Or, if this address, I hereby confirm the CT Corporation System?	fall statules relative copp the obligations document is being file the limited liability	to the proper c	ind complete përform i as registered agent a eflect a change in the been notified in writis	mica of my Aution
(Signature of Registered Agent)		Assistant	Secretary	
División o	f Corporations, P.O	. Box 6327, T	allabassee, FL 3231	4
IVHS(8(10/99)	FILING	FEE: \$25.00	•	

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