## N 160000 11823

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							
Walk IN \$35.00							

Office Use Only



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S. TALLENT MAY 22 2017

17 MAY 1

RECEIVED

THE SECTIONS

Klark

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 649848 118289A

AUTHORIZATION : O

COST LIMIT : \$ 35.00

ORDER DATE: May 18, 2017

ORDER TIME : 10:06 AM

ORDER NO. : 649848-005

CUSTOMER NO: 118289A

\_\_\_\_\_\_

## CHANGE OF AGENT

NAME: CHECKERS ADVERTISING

COOPERATIVE ASSOCIATION OF

MOBILE, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Melissa Zender -- EXT#

EXAMINER:

## **COVER LETTER**

TO:	Amendment Section Division of Corporations						
SUBJ	CHECKERS ADVERTISING COOPERATIVE ASSOCIATION OF MOBILE, I  Name of Corporation						
DOCI	N16000011823 MENT NUMBER:						
	closed Statement of Change of Registered Office/Agent and fee are submitted for filing.						
	return all correspondence concerning this matter to the following:						
	Kristina Merritt						
Name of Contact Person							
Checkers Drive-In Restaurants, Inc.  Firm/Company							
	Address						
	Tampa, FL 33607						
City/State and Zip Code							
	merrittk@checkers.com						
E-mail address: (to be used for future annual report notification)							
For fur	ther information concerning this matter, please call:						
Kristina	a Merritt 813 283-7164						
	Name of Contact Person Area Code & Daytime Telephone Number						
Enclose	ed is a \$35.00 check made payable to the Department of State.						
	Mailing Address: Amendment Section  Division of Corporations P.O. Box 6327  Tallahassee, FL 32314  Street Address: Amendment Section  Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301						

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, inge is submitted for a corporation	on organized under	the la	ws of the Stat	te of Florida		
	r to change its registered office (						
1. The name of t	he corporation: CHECKERS AD	VERTISING COO	PERA	TIVE ASSOC	IATION OF MOBILE, INC.		
The principal office address: 4300 WEST CYPRESS STREET, SUITE 600, TAMPA, FL 33607							
3. The mailing a	ddress (if different): 3001 N. RC	OCKY POINT DR E	, SUIT	E 200, TAM	PA, FL 33607		
4. Date of incorp	poration/qualification: December	er 12, 2016 Doc	ument	number: N16	8000011823		
	I street address of the current reg tment of State: (If resigned, ente		egister	ed office on f	ile with the		
•	CHRIS MUNYON						
•	4300 WEST CYPRESS STREE	ET, SUITE 600					
	ТАМРА		FL	33607			
6. The name and (if changed):	street address of the new registor	ered agent (if chang	ged) an	d /or registere	· · · · · · · · · · · · · · · · · · ·		
	Corporation Service Company						
,	1201 Hays Street						
	P.O Tallahassee	. Box NOT acceptable	FL	32301			
	ess of its registered office and the be identical.						
Such change wa authorized by th	s authorized by resolution duly board, or the corporation has	adopted by its boa been notified in wi	rd of c	lirectors or by of the change	y an officer so		
Sygnatur	e of an officer or director	RICK	BON	ENIZER,	Secretary		
I further agree t performance of agent. Or, if thi hereby confirm	the appointment as registered a comply with the provisions of my duties, and I am familiar wis document is being filed merel that the corporation has been in Service Company	di statutes relatives the control of	re to th shligat	e proper and ion of my no	l complete sition as registered		
By: Sign	nauge of Registered Agent	<del> </del>		D// 7/			
If signing on bel	half of an Melissa Zender						
	Asst. Vice President						
T	ped or Printed Name	<del></del>					

\* \* \* FILING FEE: \$35.00 \* \* \*