

PO000039396

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SAM'S ST. JOHNS SEAFOOD RESTAURANT #6 INC
Name of Corporation

DOCUMENT NUMBER: P00000039396

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

SAM BAJALIA

Name of Contact Person

RESTAURANT SOLUTIONS

Firm/Company

831 N. PALMETTO AVE

Address

GREEN COVE SPRINGS, FL 32043

City/State and Zip Code

RMSSCARBROUGH@AOL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Scarbrough

Name of Contact Person

at (904) 284-4933

Area Code & Daytime Telephone Number

Enclosed 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

