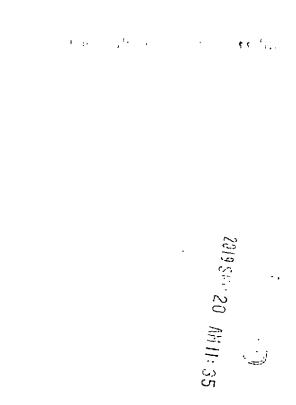
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COVER LETTER

Division of Corporations		
SUBJECT: Big Island Burntos, In Name of Corporation	7C	
DOCUMENT NUMBER: PO10000 8 10 26	~··	
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:		
Mary J. Philips Name of Contact Person	<u></u>	
Firm/Company		
aio Atlantic Drive		
Melboune Beach FL 30 City/State and 2ip Code	3951	
E-mail address: (to be used for future annual repor	t notification)	
For further information concerning this matter, please call:		
Name of Contact Person at (321) Area Code &	733-4802 Daytime Telephone Number	
Enclosed is a \$35.00 check made payable to the Department of State.		
Division of Corporations Division P.O. Box 6327 Clifton F Tallahassee, FL 32314 2661 Exc	ent Section of Corporations	

TO: Amendment Section

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this

statement of change is submitted for a corporation organized under the laws of the State of FL in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Big Island Burntos, Inc.
2. The principal office address: 814 Mramar Ave
Indialantic, FL 32903
3. The mailing address (if different):
4. Date of incorporation/qualification: 8.9.2001 Document number: P01000081024
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State; (If resigned, enter resigned)
Timothy P. Phillips
814 N. Miramar Ave
Indialantic, FL 32903
6. The name and street address of the new registered agent (if changed) and for registered office (if changed):
2
P.O. Box NOT acceptable
Melbourne Beach, Fl. 32951
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Signature of an officer or director Printed or typed name and title
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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
9-17-19
Signature of Registered Agent Pate
If signing on behalf of an entity:
Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

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