

PD30000038171

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

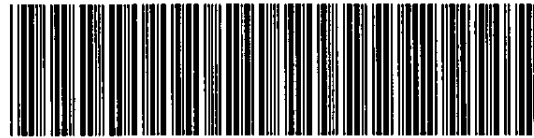
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700293057977

12/21/16--01015--001 \*\*35.00

*Wach*  
DEC 23 2016

R. WHITE

171.500  
16 DEC 21 AM 8:44  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Lemongrass Restaurant, Inc  
Name of Corporation

**DOCUMENT NUMBER:** P03000038171

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:

Phet T. Thompson

Name of Contact Person

Lemongrass Restaurant, Inc

Firm/Company

9846 Old Baymeadows Rd

Address

Jacksonville, Florida 32256

City/State and Zip Code

phet66@gmail.com

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

For further information concerning this matter, please call:

Phet T. Thompson

Name of Contact Person

at ( 904 ) 514-3442

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

**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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: Lemongrass Restaurant, Inc
2. The principal office address: 9846 Old Baymeadows Rd, Jacksonville, Florida 32256
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 4/4/2003 Document number: P03000038171

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)

Voradet Thepsouvanh

11728 Glacier Bay Dr

Jacksonville, Florida 32256

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Phet T. Thompson

9846 Old Baymeadows Rd

P.O. Box NOT acceptable

Jacksonville, Florida 32256

FILED  
16 DEC 21 AM 8:44  
TALLAHASSEE, FL 32309  
SECRETARY OF STATE

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

Phet T. Thompson, Vice President  
\_\_\_\_\_  
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.*

Phet T. Thompson  
\_\_\_\_\_  
Signature of Registered Agent

12-19-16  
\_\_\_\_\_  
Date

If signing on behalf of an entity:

PHET T. THOMPSON  
\_\_\_\_\_  
Typed or Printed Name

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