PC30CCU57702

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT	MAIL		
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Statu	s		
Special Instructions to Filing Officer:			
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COVER LETTER



TO: Amendment Section

Division of Corporations

Sam's St John's Seafood #7 Inc P03000057702

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 North Palmetto Avenue Address Green Cove Springs, FL 32043 City/State and Zip Code ssjcrs@outlook.com E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Amy Bajalia Name of Contact Person

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

	•	2, 607.1508, or 617.1508, Florida Statutes, this fized under the laws of the State of Florida
		ered agent, or both, in the State of Florida.
1. The name of	the corporation: Sam's St John's S	Seafood #7 Inc.
2. The principal Ocala, F	office address: 5400 SW College L 34470	RD #101
3. The mailing a	address (if different): 831 North Pal	metto Avenue
	Cove Springs, FL 32043	
4. Date of incor	poration/qualification: $05/27/200$	Document number: P03000057702
	d street address of the current registered a rtment of State: (If resigned, enter resigne	gent and registered office on file with the d)
	Akel, Daniel D	
	One Independent Drive	
	Jacksonville, FL 32202	AN ISION OF CO.
6. The name and (if changed):	d street address of the new registered ager	at (if changed) and /or registered office
	Sam Bajalia	
	831 North Palmetto Avenue	
	P.O. Box NOT	
	Green Cove Springs, FL 32	
The street address changed will	ess of its registered office and the street be identical.	address of the business office of its registered agent.
Such change was authorized by th	as authorized by resolution duly adopted ne board, or the corporation has been not	by its board of directors or by an officer so iffied in writing of the change.
am	y Bojasia	Amy Bajalia
- I further agree . - performance of	the appointment as registered agent and to comply with the provisions of all state my duties, and I am familiar with and a is document is being filed merely to reflet that the corporation has been notified in	Printed or typed name and title I agree to act in this capacity. Ites relative to the proper and complete seept the obligation of my position as registered sect a change in the registered office address, I s writing of this change.
_Sam	nature of Registered Agent	May 4, 2018
	half of an entity:	Date
	DAIAINA	
<u>SAM</u>	yped or Printed Name	

Make Checks payable to Florida Department of State
Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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