P050000000549

_____
(Requestor's Name)

_____
(Address)

_____
(Address)

_____
(City/State/Zip/Phone #)

☐ PICK-UP   ☐ WAIT   ☐ MAIL

_____
(Business Entity Name)

_____
(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT:**SG & MB INC**
_____
Name of Corporation

DOCUMENT NUMBER:**P05000000549**
_____

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:

Clemente Diiorio
_____
Name of Contact Person

Salems Franchise Company, LLC
_____
Firm/Company

11007 N.56th Street, Suite 209
_____
Address

Temple Terrace, Florida 33617
_____
City/State and Zip Code

SFC@SFCFL.COM
_____
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Clemente Dilorio   at (**813**) **898-2848**
_____
Name of Contact Person   Area Code & Daytime Telephone Number

Enclosed is a $35.00 check made payable to the Department of State.

Mailing Address:	**Street Address:**
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle
	Tallahassee, FL 32301

CR2E045 (03/12)

FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 3, 2012

CLEMENTE DIIORIO
SALEMS FRANCHISE COMPANY, LLC
11007 N. 56TH STREET - SUITE 209
TEMPLE TERRACE, FL 33617

SUBJECT: SG & MB, INC.
Ref. Number: P05000000549

We have received your document for SG & MB, INC. and your check(s) totaling $35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II   Letter Number: 812A00024516

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: SG & MB, INC

2. The principal office address: 11007 N. 56TH STREET, SUITE 209,
   TEMPLE TERRACE, FLORIDA 33617

3. The mailing address (if different): 11007 N. 56TH ST., SUITE 209
   TEMPLE TERRACE, FL 33617

4. Date of incorporation/qualification: 01/03/2005   Document number: P05000000549

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)

   KAYALI & CO, P.A.

   13250 N. 56TH ST. SUITE 102

   TAMPA, FL 33617

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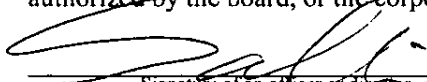
   CLEMENTE DIIORIO

   11007 N. 56TH ST, SUITE 209

   P.O. Box NOT acceptable

   TEMPLE TERRACE, FL 33617

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
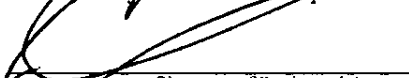
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

_____   SALEM GHARSALLI
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.

_____   SEPTEMBER 14, 2012
Signature of Registered Agent   Date

If signing on behalf of an entity:

Clemente Diiorio
Typed or Printed Name

* * * FILING FEE: $35.00 * * *