

PO6000135927

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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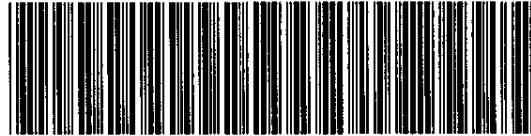
(Business Entity Name)

(Document Number)

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14 MAR 20 AM 9:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAR 24 2014

C. CARROTHERS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DALE RESTAURANTS, INC.
Name of Corporation

DOCUMENT NUMBER: P06000135927.

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:

MICHAEL DALE.
Name of Contact Person

DALE RESTAURANTS, INC.
Firm/Company

1012 VANNESSA DRIVE.
Address

OVIEDO FL 32765.
City/State and Zip Code

dale.lou1@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MICK DALE at (407) 437 9493
Name of Contact Person 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 FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: DALE RESTAURANTS, INC.
2. The principal office address: 1012 VANNESSA DRIVE
OVIEDO, FL. 32765.
3. The mailing address (if different): /
4. Date of incorporation/qualification: 10/26/2006 Document number: P06000135927
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)

CHRISTEN SVEINSEN
90. C. FL. INT'L INVESTMENTS, INC.
7061 GRAND NAT'L DR. STE 137, ORLANDO, FL. 32819

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

CHRISTEN SVEINSEN
90. C. FL. INT'L INVESTMENTS, INC.
1416 NORMANDY DR., MOUNT DORA, FL. 32757.

P.O. Box NOT acceptable

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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]

Signature of an officer or director

MICHAEL DALE - 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.

Christen Svesen

Signature of Registered Agent

2/23/14.

Date

If signing on behalf of an entity:

CHRISTEN SVEINSEN

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (03/12)