P01000024516

(Re	questor's Name)	
· (Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to August Form	Filing Officer: al CK = John K	A Georgian in





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06/25/07--01009--004

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Wendi's Dawg House Cafe, Inc. (Name of Corporation)
DOCUMENT NUMBER: PD 700026516
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:
Jessie LeRoy Davidson (Name of Contact Person)
Wendi's Dawg House Cafe, Inc. (Firm/Company)
132 Revere Street
(Address)
Port Charlotte, Florida 33952 (City/State and Zip Code)
For further information concerning this matter, please call:
T. Le Rou Davidson at (941) 815-8891 (Pell) (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State.

Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

Street Address: Amendment Section

Clifton Building

Division of Corporations

Mailing Address: Amendment Section

P.O. Box 6327

Division of Corporations

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

	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this
_	inge is submitted for a corporation organized under the laws of the State of Florida
in orde	er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation; Wendi's Dawg House Cafe, Inc.
2. The principal	office address: 2150 Tamiami Trail Unit #20
3. The mailing a	address (if different):
4. Date of incorp	poration/qualification: 2/28/07 Document number: P07000026516
	d street address of the current registered agent and registered office on file with the rtment of State:
	Wendi Davidson
	20295 Lorenzo Avenue
	Port Charlotte, Florida 33952
6. The name and (if changed):	Port Charlotte, Florida 33952 I street address of the new registered agent (if changed) and /or registered office Jessie LeRoy Davidson 132 Revere Street (P.O. Box NOT acceptable)
	Jessie LeRoy Davidson
	132 Revere Street
	(P.O. Box NOT acceptable)
	Port Charlotte, Florida 33952
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
9/80 Signati	Lisa Gonzales/Vice President (Printed or typed name and title)
I hereby accept I further agree of my duties, an document is bei corporation has	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance ad I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the s been notified in writing of this change.
	1-15 17
(Si	greature of Registered Agent) (Date)
If signing on be	chalf of an entity:
Tessia (L. Roy Da videac Typed or Printed Name)

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