

P09000042637

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

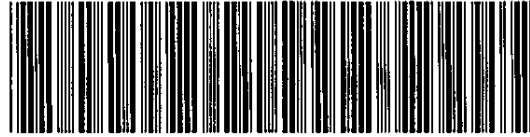
(Business Entity Name)

(Document Number)

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CLERK OF STATE
TALLAHASSEE, FLORIDA

2015 MAY 20 AM 7:08

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MAY 26 2014

C. CARROTHERS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: L+M Restaurant Consultants, Inc.
Name of Corporation

DOCUMENT NUMBER: PO9000042637

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 A. Spavello
Name of Contact Person

L+M Restaurant Consultants, Inc.
Firm/Company

PO Box 551663
Address

Jacksonville, FL 32255
City/State and Zip Code

msspavello@bellsouth.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Spavello at (904) 307-6477
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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Ltm restaurant Consultants, Inc.
2. The principal office address: 8730 Hampton Landing Drive East
Jacksonville, FL 32256
3. The mailing address (if different): PO Box 55163
Jacksonville, FL 32255
4. Date of incorporation/qualification: May 2009 Document number: 909000042637
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)

Brian Rowland
10752 Deerwood Park Blvd Suite 100
Jacksonville, FL 32256

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

Michael A. Spavelko
8730 Hampton Landing Drive East
P.O. Box NOT acceptable
Jacksonville, FL 32256

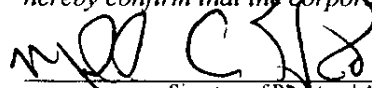
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

Michael A. Spavelko 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.


Signature of Registered Agent

5-6-15
Date

If signing on behalf of an entity:

Michael A. Spavelko
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)

2015 MAY 20 AM 7:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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