## P09000092602

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## **COVER LETTER**

Division of Corpora			
SUBJECT:	MIKATA BUFF	ET INC	
	Name of Co	rporation	
DOCUMENT NUMBER:	P090	00092602	
The enclosed Statement of C	Change of Registered Office/	Agent and fee are subr	mitted for filing.
Please return all corresponde	ence concerning this matter t	to the following:	
	KEVIN Name of Cont	SEA	
	Name of Cont	act Person	
	C.K.SEA &	CO LLC	
<del> </del>	Firm/Con		<del></del>
	15 DIVISION S	ST STE 708	
	Addre		······································
	NEW YORK,	NY 10002	
	City/State and	Zip Code "	
	ckseacpa@ho	tmail.com	
E-mail a	ddress: (to be used for fut	ure annual report not	ification)
For further information conc	erning this matter, please ca	11:	
	N SEA	at ( 212 )	966-7199
Name of Con	tact Person	Area Code & Day	966-7199 time Telephone Number
Enclosed is a \$35.00 check n	nade payable to the Departm	ent of State.	
Am Div P.O	ling Address: endment Section ision of Corporations . Box 6327 ahassee, FL 32314		Section Corporations ing ve Center Circle
		Tallahassee,	FL 32301

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

statement of cha	provisions of sections 60 nge is submitted for a c r to change its registere	orporation organized	under the laws of the	State of FLOR		
1. The name of t	he corporation: MIKA	TA BUFFET II	NC.			
2. The principal	office address: 3201 N	W FEDERAL H	WY JENSEN BEA	ACH, FL 3495	7	
			·			
3. The mailing a	ddress (if different): 15	DIVISION ST S	TE 708 NEW YOR	RK, NY 10002	2	
4. Date of incorp	ooration/qualification: _	11/10/2009	_ Document number:	P09000	00926	02
	street address of the cu tment of State: (If resign		and registered office of	on file with the		
	RESIGNED					
				s		
				TAL	2011	
6. The name and (if changed):	street address of the ne	w registered agent (if	changed) and /or regis	LANAS:	2010 NOV - 1	<u> </u>
	KONG T NI			,338 1338 		m
	3201 NW FEDERA			57 FL <b>9</b> 8	AH 11: 20	
		P.O Box NOT acce	eptable	9	26	
The street addre	ss of its registered office the identical.	ce and the street add	ress of the business of	Tice of its regist	ered ag	ent,
Such change wa authorized by th	s authorized by resolut e board, or the corpora	ion duly adopted by tion has been notific	its board of directors d in writing of the cha	or by an officer ange.	so	
XiQ_L Signatura	e of an officer or director		XIA UN			
I hereby accept I further agree to of my duties, and document is bein corporation has	the appointment as reg o comply with the prov t I am familiar with an ng filed merely to reflec been notified in writin	istered agent and ag isions of all statutes d accept the obligate a change in the re g of this change.	man to not in this some		erformi Or, if rm that	ance this the
_ Kon	ature of Registered Agent		10/2	7/10		_
lf signing on bel			Date			
Ту	ped or Printed Name					

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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