Y 1000094832

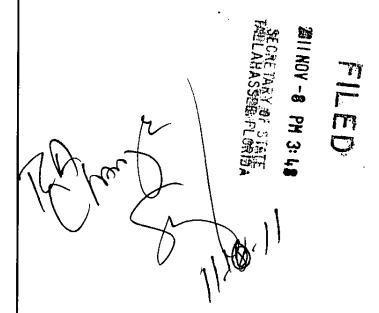
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: EISE Coastal Dining Name of Corporation
DOCUMENT NUMBER: \$1000094832
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:
Name of Contact Person
Elise Gastal Dining
732 Peake's Point
GUF Breeze H 32561 City/State and Zip Code
E-mail address: (so be used for future annual report notification)
For further information concerning this matter, please call: Tustine Dimoni at 750 934-277 4 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

1. The name of the corporation: Else Coastal Dining 2. The principal office address: 22 N. Palatox St.
2. The principal office address: 22 No. Palatox St
Pensacola FL 32502
3. The mailing address (if different): Was > POBOX 486, GUF Breeze, FL3256 New 9 732 Peake's Point, G.B., 32561
4. Date of incorporation/qualification: 11/17/2010 Document number: P1000094832
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)
Frank Kushing 732 Peakes Point Gulf Breeze FL 3256
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Think
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.
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 If signing on behalf of an entity:

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 * * *