

P11000018389

OSTH Hargrave
7901 Crossman Lane
Baltimore MD 21204

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B.A.

JAN 25 2012

T. BROWN

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Paddy Osullivan's Gourmet Burgers Inc.
Name of Corporation

DOCUMENT NUMBER: P110000 18389

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:

JOHN HARGRAVE
Name of Contact Person

Paddy Osullivan's Gourmet Burgers Inc.
Firm/Company

6101 GULF Blvd
Address

St Pete Beach FL 33706
City/State and Zip Code

John Hargrave1@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOHN Hargrave at 817 846 2220
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 9, 2012

JOHN HARGRAVE
7901 CROSSMORR LANE
BALTIMORE, MD 21204

SUBJECT: PADDY O'SULLIVANS GOURMET BURGERS INC.
Ref. Number: P11000018389

We have received your document for PADDY O'SULLIVANS GOURMET BURGERS INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered agent must be at a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Teresa Brown
Regulatory Specialist II

Letter Number: 112A00000524

**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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Daddy O'Sullivan's Gourmet Burgers Inc.
2. The principal office address: 6101 GULF Blvd
St. Pete Beach FL 33706
3. The mailing address (if different): 6101 GULF Blvd
4. Date of incorporation/qualification: 2/22/2011 Document number: 011000018389

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)

Janice Hargrave
6101 GULF Blvd
St Pete Beach FL. 33706

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

JOHN HARGRAVE
6101 GULF Blvd
St Pete Beach FL. 33706

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

John Hargrave / 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]
Signature of Registered Agent

1/18/2012
Date

If signing on behalf of an entity:

JOHN HARGRAVE
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