# P12000061553

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. HAWKES

AUI- -

**EXAMINER** 

#### **COVER LETTER**

TO: Amendment Section Division of Corporations

 $_{
m SUBJECT:}$  CAFE LAPLANTE, INC.

Name of Corporation

DOCUMENT NUMBER: P12000061553

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:

#### **DENISE HOLLOWAY**

Name of Contact Person

#### **BOUVIER & ASSOCIATES**

Firm/Company

3210 N. WICKHAM ROAD, STE 5

Address

MELBOURNE, FL 32935

City/State and Zip Code

### dholloway@bouvierassoc.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Denise Holloway

,321

752-9967

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

_	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	r to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	the corporation: Cafe Laplante, Inc.
2. The principal	office address: 1730 Kinsale Court, Melbourne, FL 32940
3. The mailing a	ddress (if different): SAME
4. Date of incorp	poration/qualification: 7/13/2012 Document number: P12000061553
	I street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)
	Terry Laplante
	1730 Kinsale Court
	Melbourne, FL 32940
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office
	Paul A. Bouvier, P.A.  3210 N. Wickham Road, Suite 5
	P.O. Box NOT acceptable  Melbourne, FL 32935
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change.
	uz faklante Terry Laplante
I hereby accept I further agree to performance of agent. Or, if the	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 my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
Sign	nature of Registered Agent Date
_	half of an entity:
Paul A. Bou	·
	yped 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)