P35937

	(Requestor's Name)	. , , , , , ,
	(Address)	
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PICK-UF	WAIT	MAIL.
(Business Entity Name)		
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DETAILS OF CORPORATIONS
OTALL A HASSEE FLORIDA

RECEIVED

09 FEB 19 AM II:
SECRETARY OF ST

R.A. Change C.COULLIETTE

EXAMINER



ACCOUNT NO. : 072100000032

REFERENCE :

78594) 502805:

AUTHORIZATION

 U_{i}

COST LIMIT : \$ 35.00

ORDER DATE: February 2, 2009

ORDER TIME : 8:59 AM

ORDER NO. : 878594-032

CUSTOMER NO: 5028052

CHANGE OF AGENT

NAME: RESTAURANT FINANCE CORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman

EXAMINER'S INITIALS:

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

Pursuant to the provisions of sections 607.0502, 617.0502, statement of change is submitted for a corporation organize in order to change its registered office or registere	ed under the laws of the State of Ohio
1. The name of the corporation: RESTAURANT FIN	NANCE CORPORATION
2. The principal office address: 4288 W. Dublin-Gra Dublin, OH 43017	inville Road, Attn: Tax Dept.,
3. The mailing address (if different): 4288 W Dublin-Oppt., Dublin, OH 43017	Granville Road, P.O. Box 256, Attn: Tax
4. Date of incorporation/qualification: 10/14/1991	Document number: P35937
5. The name and street address of the current registered ager Florida Department of State:	
CT Corporation System	
1200 S. Pine Island Road	
Plantation, FL 33324	SEC TALL
6. The name and street address of the new registered agent ((if changed):	if changed) and /or registered office
Corporation Service Company	
1201 Hays Street	
(P.O. Box NOT acceptable) Tallahassee, FL 32301	AIE RIDA
The street address of its registered office and the street ad as changed will be identical.	dress of the business office of its registered agent,
Such change was authorized by resolution duly adopted be authorized by the board, or the corporation has been notif	y its board of directors or by an officer so ried in writing of the change.
Marian Culling (Signature of an officer or director)	Maureen Cullen, Attorney in fact (Printed or typed name and title)
I hereby accept the appointment as registered agent and a further agree to comply with the provisions of all statute of my duties, and I am familiar with and accept the obligated document is being filed merely to reflect a change in the recorporation has been notified in writing of this change. Corporation Service Company	goree to act in this capacity
	2-18-09 (Date)
If signing on behalf of an entity:	
Michelle R. Vannoy (Typed 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 * * *