

P93000004557

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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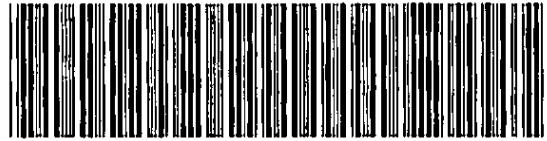
(Business Entity Name)

(Document Number)

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TO: Amendment Section  
Division of Corporations

SUBJECT: Sam's St John's Seafood #3 Inc  
Name of Corporation

DOCUMENT NUMBER: P93000004557

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:

Sam Bajalia

Name of Contact Person

Restaurant Solutions

Firm/Company

831 North Palmetto Avenue

Address

Green Cove Springs, FL 32043

City/State and Zip Code

ssjcrs@outlook.com

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

For further information concerning this matter, please call:

Amy Bajalia

Name of Contact Person

at ( 904 ) 284-4933

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**

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

1. The name of the corporation: Sam's St John's Seafood #3 Inc.
2. The principal office address: 7119 North Hwy 441  
Ocala, FL 34475
3. The mailing address (if different): 831 North Palmetto Avenue  
Green Cove Springs, FL 32043
4. Date of incorporation/qualification: 01/20/1993 Document number: P93000004557
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)  
Chapman, J. Stanley  
211 S Gadsden St  
Tallahassee, FL 32301

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

Sam Bajalia  
831 North Palmetto Avenue  
P.O. Box NOT acceptable  
Green Cove Springs, FL 32043

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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.

Amy K. Bajalia  
Signature of an officer or director

Amy Bajalia  
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.*

Sam Bajalia  
Signature of Registered Agent

May 4, 2018  
Date

If signing on behalf of an entity:

SAM BAJALIA  
Typed or Printed Name

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