P9800038923	
(Requestor's Name) (Address) (Address)	200290293842
(City/State/Zip/Phone #)	09/30/1601010003 **35.00
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	2016 SEP 30
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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Etyet Inc

Name of Corporation .

DOCUMENT NUMBER: P98000038923

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:

Roy M Turner

Name of Contact Person

Etyet Inc dba.Sandbar Grill

Firm/Company

2602 Bayshore Blvd

Address

Dunedin FI 34698

City/State and Zip Code

rmtinc@verizon.net

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

For further information concerning this matter, please call:

Roy M Turner

Name of Contact Person

727 _656 183**2**

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

CR2E045 (03/12)

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

1. The name of the corporation: Etyet Inc

2. The principal office address: 2602 Bayshore Blvd Dunedin FI 34698

3. The mailing address (if different): 2602 Bayshore Blvd Dunedin FI 34698

4. Date of incorporation/qualification: 04/29/98 Document number: P98000038923

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)

Roy M Turner

2973 Brookfield Lane Clearwater FI 33761

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

Roy M Turner

202 Maple Ave Palmharbor FI 34684

P.O. Box NOT acceptable

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.

11 affiire or director

Roy M Turner

Printed or typed name and title

Date

I hereby accept the appointment as registered agent and agree to act in this capacity. I further deree 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.

ure of Registered Agen

If signing on behalf of an entity:

Roy	М	Turner
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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 CR2E045 (03/12)

9/28/2016

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