

## Florida Department of State

Division of Corporations Public Access System

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Account Name ; HILL, WARD & HENDERSON, P.A. II

Account Number : 072100000520 Phone : (813)221-3900 Fax Number : (813)221-2900 SECRETARY OF STATI

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## REGISTERED AGENT CHANGE

LA CASITA TAMPA, INC.

| Certificate of Status | 0       |
|-----------------------|---------|
| Certified Copy        | 0       |
| Page Count            | 01      |
| Estimated Charge      | \$35.00 |

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8/29/2005

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

| 1. The name of  | of the corporation: La Casita Tampa, Inc.   |  |
|---|---|--|
| 2. The princip  | al office address: 2908 Azeele Street, Tampa, Florida 33609   |  |
| 3. The mailing  | g address (if different):   |  |
| 4. Date of inc  | orporation/qualification: 04/22/1999 Document number: P990000369  | )76  |
|   | and street address of the current registered agent and registered office on file with the<br>partment of State:   | i <b>e</b>                                       |
|   | Susan Bretting  | ,  |
|   | 101 East Kennedy Boulevard, Suite 3700  |  |
|   | Tampa, Florida 33602  | PALL SEC   |
| 6. The name a<br>(if changed  | and street address of the new registered agent (if changed) and /or registered office ):  S. Katherine Frazier  | SECRETARY OF ST                                  |
|   |   | FLO  |
|   | 101 East Kennedy Boulevard, Suite 3700 (P.O. Box NOT acceptable)  | TATE   |
|   | Tampa, Florida 33602  |  |
| as changed w  | dress of its registered office and the street address of the business office of its reall be identical.  was authorized by resolution duly adopted by its board of directors or by an off the board, or the corporation has been notified in writing of the change.   | _  |
| (5)8  | nature of an officer or director)  [Printed of typed harns and mus)   | n, mi  |
| I hereby acce<br>I further agre<br>of my duties,<br>document is,<br>corporation | upt the appointment as registered agent and agree to act in this capacity is to comply with the provisions of all statutes relative to the proper and comple and I am familiar with and accept the obligation of my position as registered as being filed merely to reflect a change in the registered office address, I hereby chas been notified in writing of this change. | te performan<br>zent. Or, if th<br>onfirm that t |
|   | 8/26/05   |  |
|   | (Signature of Registered Agent) (Date)  |  |

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

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