199000063597

DEAN, MEAD, SPIELVOGEL, GOLDMAN & BOYD

ATTORNEYS AND COUNSELORS AT LAW

IO: SOUTH COURTENAY PARKWAY, SUITE 201 MERRITT ISLAND, FLORIDA 32952-4855 (407) 453-2333 FAX (407) 453-864:

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JOO RIALTO PLACE, SUITE SID MELBOURNE, FLORIDA 32901 (407) 725-6373 FAX (407) 726-8477

REPLY TO:

September 29, 1999

Murrell Road

Florida Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

700003008667--5. -10/07/99--01070--016 *****35.00 *****35.00

Change of Registered Office and Registered Agent Bahamian Waterfront Grill Co.

Gentlemen:

Enclosed please find an original Statement of Change of Registered Office or Registered Agent or Both for Bahamian Waterfront Grill Co. Also enclosed is a check in the amount of \$35.00 to cover the filing fee.

Once this change has been completed by your office, please return confirmation of same to this office in the envelope provided.

truly yours,

R. MASON BLAKE

RMB/lc Enclosures

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

the undersigned	provisions of sections 607.0302, 617.0302, 607.130 corporation organized under the laws of the State of	Florida
the State of Flor	owing statement in order to change its registered official. The corporation is: Bahamian Waterfront Gri	
	•	
_	ddress of the corporation is: 619 Casa Grande Dr	rive, Melbourne,
3. Date of incor	poration/qualification: July 16, 1999 Docum	nent number: P99000063597
	l address of the current registered agent and office:	
	James H. Fallace	ering Town
_	1900 S. Hickory Street, Suite A	Box Not Acceptable
	Melbourne, FL 32901	
5. The name and	address of the new registered agent and office: (P. O.	Box Not Acceptable
	R. Mason Blake	FE S
_	7380 Murrell Road, Suite 100	
	Melbourne, FL 32940	
agent, as change	ss of its registered office and the street address of the d, will be identical.	•
Conn	is authorized by resolution duly adopted by its board to board. Crowdian of the board)	of directors or by an officer so 9-20-99 (Date)
		(240)
Terren	(Printed or typed name and title)	
corporation, I he I further agree to	med as registered agent and to accept service of proceeds accept the appointment as registered agent an ocomply with the provisions of all statutes relative to my duties; and I am familiar with and accept the obl	d agree to act in this capacity. To the proper and complete
1		9-20-99
(Si	gnature of Registered Agent)	(Date)
If signing on behalf	of an entity:	
	lason Blake	(Conceity)
(1	yped or Printed Name)	(Capacity)
	* * * FILING FEE: \$35.00 * * *	
CR2E045(7/97)		

P.O. Box 6327

TALLAHASSEE, FL 32314

DIVISION OF CORPORATIONS

P99000063597

DEAN, MEAD, SPIELVOGEL, GOLDMAN & BOYD

ATTORNEYS AND COUNSELORS AT LAW

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REPLY TO:

September 29, 1999

Murrell Road

Florida Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 700003008667--5 -10/07/99--01070--016 *****35.00 ******35.00

Re: Change of Registered Office and Registered Agent

Bahamian Waterfront Grill Co.

Gentlemen:

Enclosed please find an original Statement of Change of Registered Office or Registered Agent or Both for Bahamian Waterfront Grill Co. Also enclosed is a check in the amount of \$35.00 to cover the filing fee.

Once this change has been completed by your office, please return confirmation of same to this office in the envelope

provided.

Very truly yours,

R. MASON BLAKE

RMB/lc Enclosures

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

	provisions of section	•	•	-	•	Statutes,
-	corporation organiz		•			
.	owing statement in o	rder to change its	registered offi	ice or registere	ed agent, or	both, in
the State of Flor		Debeuden W		411 Co.	•	
1. The name of t	the corporation is:	Banamian wa	iteriront Gr.	iii co.	-	
	PARTITION OF THE PARTIT			···		
2. The mailing a	ddress of the corpor	ation is: 619 Ca	isa Grande D	rive, Melbou	rne,	
Florid	a 32940					
3. Date of incor	poration/qualification	n: <u>July 16, 19</u>	999 Docu	ment number:	P99000063	5 97
4. The name and	address of the curre	ent registered agen	t and office:	· .		
_	James H. F	allace	- w .		F c	
•	1900 S. ні	ickory Street,	Suite A			99 OCT -7 PM
_	Melbourne,	, FL 32901		<u> </u>		<u> </u>
5. The name and	address of the new	registered agent a	nd office: (P. O	. Box Not Acc	eptable)	- F
	R. Mason E	Blake			TO TO	<u> </u>
_	7380 Murre	ell Road, Suite	≥ 100° (: × = × =		-: 05
_		, FL 32940	-		DA E	
The street addre	ss of its registered o	office and the stree	et address of th	e business offi	ce of its reg	ristered
Such change wa authorized by th	s authorized by reso	olution duly adopt	ed by its board	of directors or	by an offic	er so
Lone	-	novo	/ <u></u> .	9-2	0-99	
(Signature o	f an officer, chairman or v	rice chairman of the boa	ard)	(D	ate)	
Terren	ce A. Crovo					
	(Printed or typed nam					
corporation, I he I further agree t	med as registered agereby accept the appointments of comply with the pointment am	pointment as regis rovisions of all sta	stered agent an atutes relative i	id agree to act to the proper a	in this capa and complete	icity. e
So				9-20-	99	
	gnature of Registered Age	nt)		(Date)	•	
If signing on behalf	•					
	ason Blake yped or Printed Name)			(Capacity)		
,	,	* * FII INC FFF	'. ¢25 AA * * *			