## 141530

(R	equestor's Name)	
(Ad	ddress)	
(Ac	ddress)	
(Ci	ity/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
· (Bo	usiness Entity Nar	ne)
· (Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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## **COVER LETTER**

Division of Corporations
SUBJECT: Las Brisas Restaurant, Inc. (Name of Corporation)
DOCUMENT NUMBER: V41530
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:
Eduardo Falcon (Name of Contact Person)
City Community Developers of Florida (Firm/Company)
16850-112 Collins Avenue, #138 (Address)
Sunny Isles Beach, FL 33160 (City/State and Zip Code)
For further information concerning this matter, please call:
Eduardo Falcon at (305) 989-1114 (Name of Contact Person) (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: LAS BRISAS RESTAURANT, INC.
2. The principal office address: 600 N. Surf Road, # 8 & 9, Hollywood, Florida
3. The mailing address (if different):
4. Date of incorporation/qualification: 6/4/1992 Document number: V41530
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Alberto Galan
600 North Surf Road, # 8 & 9
Hollywood, Florida 33019
5. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Eduardo Falcon
Eduardo Falcon
c/o 16850-112 Collins Avenue, #138
Sunny Isles Beach, FL 33160
The street address of its registered office and the street address of the business office of its registered agent, is 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.
(Signature of an officer or director)  Eduardo Falcon (Printed or typed name and title)
hereby accept the appointment as registered agent and agree to act in this capacity, further agree to comply with the provisions of all statutes relative to the proper and complete performance if my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this ocument is being filed merely to reflect a change in the registered office address, I hereby confirm that the orporation has been notified in writing of this change.
(Signature Obtrovistered Avent)  4/24/08  (Date)
(bale)
f signing on behalf of an entity:
(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 \* \* \*