

✓ 56423

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

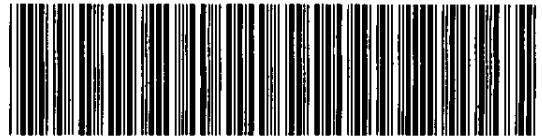
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/06/08--01010--018 **35.00

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SECRETARY OF STATE
DIVISION OF CORPORATE AFFAIRS
08 OCT 21 AM 9:39

L.A. Chorge

C.COULLIETTE

OCT 21 2008

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MVP's Sports Grille, Inc.

(Name of Corporation)

DOCUMENT NUMBER: V56423

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:

Abraham I. Bateh

(Name of Contact Person)

Law Offices of Bateh & Clark

(Firm/Company)

1558 San Marco Boulevard

(Address)

Jacksonville, Florida 32207

(City/State and Zip Code)

For further information concerning this matter, please call:

Abraham I. Bateh

(Name of Contact Person)

at (904)

396-1300

(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 10, 2008

ABRAHAM I. BATEH
LAW OFFICES OF BATEH & CLARK
1558 SAN MARCO BLVD
JACKSONVILLE, FL 32207

SUBJECT: MVP'S SPORTS GRILLE, INC.
Ref. Number: V56423

We have received your document for MVP'S SPORTS GRILLE, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The designation of the registered agent must be at a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette
Regulatory Specialist II

Letter Number: 808A00053384

RECEIVED
2008 OCT 20 AM 9:00
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

**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: MVP's Sports Grille, Inc.
2. The principal office address: 12777 Atlantic Boulevard, Jacksonville, Florida 32225

3. The mailing address (if different): _____

4. Date of incorporation/qualification: August 1, 1992 Document number: V56423

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Ross T. Clark

1558 San Marco Boulevard

Jacksonville Florida 32207

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

Abraham I. Bateh

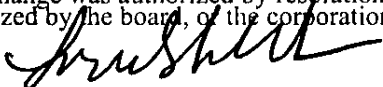
1558 San Marco Boulevard

(P.O. Box NOT acceptable)

Jacksonville, FL 32207

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

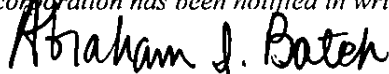
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


(Signature of an officer or director)

Louis S. Kazaleh

(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.



(Signature of Registered Agent)

10-1-08

(Date)

If signing on behalf of an entity:

(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 (8/05)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 OCT 21 AM 9:39