

VU5322

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

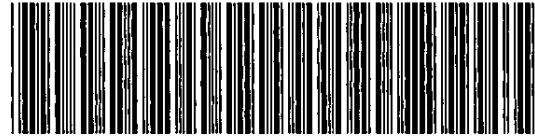
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500235451925

05/25/12--01005--017 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 MAY 25 PM 3:46

Rolch
10 5/29/12

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Joe Knows Lunch Inc.

Name of Corporation

DOCUMENT NUMBER: V65322

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:

Joel Siegel

Name of Contact Person

Joe Knows Lunch Inc.

Firm/Company

6500 NW 12 Ave. Suite 101

Address

Ft. Lauderdale, Florida 33309

City/State and Zip Code

Jknownlunch@aol.com

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

For further information concerning this matter, please call:

Joel Siegel

Name of Contact Person

at (954) 977.5454

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 977 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Joe Knows Lunch Inc.
2. The principal office address: 6500 NW 12 Ave Suite 101 Ft. Lauderdale, Florida 33309
3. The mailing address (if different): _____

4. Date of incorporation/qualification: September 1992 Document number: V65322

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)

Joel Siegel

6880 Powerline Rd

Ft. Lauderdale, Florida 33309

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

6500 NW 12 Ave Suite 101

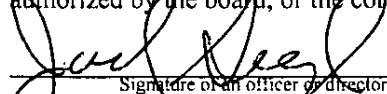
P.O. Box NOT acceptable

Ft. Lauderdale, Florida 33309

FILED
SECRETARY OF CORPORATIONS
12 MAY 25 PM 3:46

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

Joel Siegel V.P.
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

May 21, 2012

Date

If signing on behalf of an entity:

JOEL SIEGEL
Typed or Printed Name

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