V65322

| (Requestor's Name) | | | |
|---|--|--|--|
| | | | |
| (Address) | | | |
| | | | |
| (Address) | | | |
| (0) 10 1 7 (0) | | | |
| (City/State/Zip/Phone #) | | | |
| PICK-UP WAIT MAIL | | | |
| | | | |
| (Business Entity Name) | | | |
| | | | |
| (Document Number) | | | |
| Certified Copies Certificates of Status | | | |
| Certified Copies Certificates of Status | | | |
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| Special Instructions to Filing Officer: | | | |
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Office Use Only



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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

3900 Oaks Clubhouse Drive Apt 112

Address

Pompano Beach, Florida 33069

City/State and Zip Code

Jknowlunch@aol.com

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

For further information concerning this matter, please call:

Joel Siegel

,954

5601791

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

| | provisions of sections 607,0502, 617,0502 ange is submitted for a corporation organi | zed under the laws of the State of Florida | |
|---|--|--|--|
| | er to change its registered office or registe | | |
| 1. The name of | the corporation: Joe Knows Lunch | Inc. | |
| 2. The principal office address: 6500 N.W. 12th Ave unit 101 | | | |
| Fort Lau | derdale, Florida 33309 | <u> </u> | |
| 3. The mailing a | address (if different): | | |
| 4. Date of incor | rporation/qualification: 9/17/1992 | Document number: v65322 | |
| 5. The name an Florida Depa | nd street address of the current registered ag artment of State: (If resigned, enter resigned | gent and registered office on file with the | |
| | Joel Siegel | | |
| | 6500 NW 12th Ave unit 101 | | |
| | Fort Lauderdale, Florida 333 | 09 P P | |
| 6. The name and street address of the new registered agent (if changed) and /or registered agent (if changed): | | | |
| | Joel Siegel | | |
| 3900 Oaks Clubhouse Drive Apt 112 | | | |
| | P.O. Box NOT acceptable | | |
| | Pompano Beach, Florida 330 | | |
| The street address changed will | ress of its registered office and the street a I be identical. | ddress of the business office of its registered agent, | |
| Such change was authorized by the | ras authorized by resolution duly adopted he board, or the corporation has been noti | by its board of directors or by an officer so fied in writing of the change. | |
| Signan | ure of an officer of director. | Heather Siegel President | |
| 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. | | | |
| Jack | Dien | 07/10/2017 | |
| | gnature of Registered Agent | Date | |
| | chalf of an entity: | | |
| Joel Siegel | Typed or Printed Name | | |
| - | • | | |

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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