

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000018513

**Entity Name:** RESTAURANT ADVISORY GROUP, LLC

**Current Principal Place of Business:**

1270 NORTH EGLIN PARKWAY, SUITE C-14  
SHALIMAR, FL 32579

**Current Mailing Address:**

1270 NORTH EGLIN PARKWAY, SUITE C-14  
SHALIMAR, FL 32579 US

**FEI Number: 46-1958764**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

POWELL, RICHARD H ESQ.  
92 EGLIN PARKWAY, NE  
FORT WALTON BEACH, FL 32548 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |                            |                 |                            |
|-----------------|----------------------------|-----------------|----------------------------|
| Title           | MGR                        | Title           | MGR                        |
| Name            | COOPER, CHARLES            | Name            | BRYANT, GARY               |
| Address         | 171 BROOKS STREET, SE      | Address         | 171 BROOKS STREET, SE      |
| City-State-Zip: | FORT WALTON BEACH FL 32548 | City-State-Zip: | FORT WALTON BEACH FL 32548 |

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: CHARLES COOPER**

**MGR**

**02/23/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date