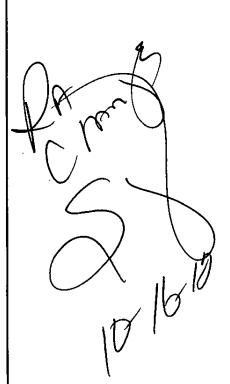
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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: Camellia Street Grill, Inc.

Name of Corporation

DOCUMENT NUMBER, P07000080849

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:

Terri Rementeria

Name of Contact Person

Camellia Street Grill, Inc.

Firm/Company

38477 Tamiami Trail East

Address

Ochopee, FL 34141

City/State and Zip Code

msrementeria@yahoo.com

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

For further information concerning this matter, please call:

Terri Rementeria

, 239

325-7918

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

statement of cha	provisions of sections 607.0502, 617.0502 nge is submitted for a corporation organi r to change its registered office or registe	ized under the laws of the State	of Florida
1. The name of t	he corporation: Camellia Street Gr	ill, Inc.	
2. The principal	office address: 38477 Tamiami Tra , FL 34141	ail East	
3. The mailing a	ddress (if different): same		
4. Date of incorp	poration/qualification: 7/16/2007	Document number: P07	000080849
	street address of the current registered ag tment of State: (If resigned, enter resigned		e with the
	Spiegel & Utrera, P.A.		
	1840 Coral Way - 1840 Building		
	Miami , FL 34145		
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):			
	Terri Rementeria		
	38477 Tamiami Trail East		
	Ochopee, FL 34141	acceptable	5 5
The street addre	ess of its registered office and the street a be identical.	address of the business office of	of its registered agent,
Such change wa authorized by th	as authorized by resolution duly adopted ne board, or the corporation has been not	by its board of directors or by ified in writing of the change.	an officer so
Telle	Kewentekit	Terri Rementeria, Pre	
I further aerea	the appointment as registered agent and to comply with the provisions of all statum my duties, and I am familiar with and act is document is being filed merely to reflet that the corporation has been notified in	ites relative to the proper and i	complete tion as registered office address, I
18kli	MEWEWELLY nature of Registered Agent	September / O , 20	12
If signing on be	half of an entity:		
Terri Reme	nteria yped 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 * * *