

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TRIAD PROFESSIONAL SERVICES LLC COA

Account Number : I20080000085 Phone : (770)777-2091 Fax Number : (770)220-1943

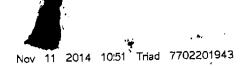
Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

REGISTERED AGENT CHANGE WATER BAGELS LADY LAKE, LLLP

Certificate of Status	О
Certified Copy	D
Page Count	01
Estimated Charge	\$35.00

EOV 1 3 2014

T. HAMPTON



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LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1	WATER BAGELS	LADY LA	KE, LLLP	
N	ame of Limited Partnership or Lim	ited Liability		•
2. 1/31/2013 Date of filing/registration in Florida		3.	3. A1300000056 Florida document number	
4. The name of the re Department of State:	egistered agent and the registered	effice address	as shown on the	records of the Florida
	D'Angelo,	Michael		
	Narr			
	201 North U.S. High	hway 1, Su	ite C-5	<u>.</u>
	Addr	065		ASE T
	Jupiter, Fi			CRE
	City, State	and Zip		数 72 图
5. The name and Flor	rida street address of the new regi	stered agent ar	nd/or office:	TALLAHASSEE, F
	NRAI Servi	ces, inc.		
	Nam	ie		विस्ति अ
	1200 South Pine	Island Ro	ad	8FF 2
	Florida street address (P.0). Box not acc	eptable)	•
	Plantation	F	L 33324	
	City, State	and Zip		
6. Such change(s) is/s	are effective when filed by the Flo	rida Departme	ent of State.	
Signature of General F	Partner Robert S. Green, Ma	nager of the	e GP	
comply with the provis	pointment as registered agent and tions of all statutes relative to the agent accept the obligations of my p	proper and co	implete performi	
Signature of Registere	d Agent KRahm, Asst Secret	ary to NRA	I	
Filing Fee:	\$35.00	(((+)	400026	1826 3)))

Certified Copy (optional): \$52.50