

A13000000352 ✓

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

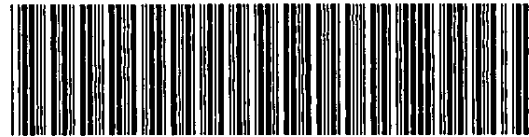
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400251270654

09/03/13--01036--010 **52.50

FILED
2013 SEP -4 AM 11:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK

SEP 05 2013

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WATER BAGELS LAKE MART, LLLP
Name of Limited Partnership or Limited Liability Limited Partnership

The enclosed Statement of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

MICHAEL D'ANGELO
Contact Person

WATER BAGELS LAKE MART, LLLP
Firm/Company

201 N. U.S. HIGHWAY ONE, SUITE C-5
Address

JUPITER, FLORIDA 33477
City, State and Zip Code

dangelo.470@go.com
E-mail address (to be used for future annual report notification)

2013 SEP -4 AM 11:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

GARY SPEAR at (561) 455-7490
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$52.50 Filing Fee ☐ \$61.25 Filing Fee and Certificate of Status ☐ \$105.00 Filing Fee and Certified Copy ☐ \$113.75 Filing Fee, Certified Copy, and Certificate of Status

STREET ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

**STATEMENT OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED PARTNERSHIP
OR
LIMITED LIABILITY LIMITED PARTNERSHIP**

WATER BAGELS LAKE MART, LLLP

Insert name currently on file with Florida Department of State

A13000000352

Pursuant to the provisions of section 620.1207, Florida Statutes, this limited partnership or limited liability limited partnership submits the following certificate of correction.

FIRST: The reason for filing this certificate of correction is:

☒ The record contained false or erroneous information.

☐ The record was defectively signed.

SECOND: This statement corrects CERTIFICATE OF LIMITED PARTNERSHIP

Specify document type being corrected

filed with the Florida Department of State on 7-1-13

Insert date document filed with Dept. of State

THIRD: The false or erroneous information or defect is as follows:

THE NAME AND ADDRESS OF ALL GENERAL PARTNERS ARE:
TITLE: G
MICHAEL D'ANGELO TIL
201 N. HIGHWAY ONE, SUITE C-5
JUPITER, FLORIDA 33477

FOURTH: The false or erroneous information or defect is corrected as follows:

THE NAME AND ADDRESS OF ALL GENERAL PARTNERS ARE:
TITLE: G
MD/NA RESTAURANT FUND I GP, LLL
201 N. U.S. HIGHWAY ONE, SUITE C-5
JUPITER, FLORIDA 33477

Signature of a general partner*:

(*Note: If adding or deleting an election to be a limited liability limited partnership statement, all general partners must sign. If adding additional general partner(s), the new general partner(s) must sign).

Michael J. G. 7/22
General Partner

Signature(s) of new general partner(s), if any:

Michael J. G. 7/22
President
MD/NA RESTAURANT FUND I GP, LLC

2013 SEP -4 AM 11:03
SECURE COPY OF RECORD
TALLAHASSEE, FL 32310

Filing Fee:	\$52.50
Certified Copy (optional):	\$52.50
Certificate of Status (optional):	\$8.75