

# 2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L01000001448

**FILED**  
**Oct 26, 2006**  
**Secretary of State**

**Entity Name:** BONJOUR BAKERY & CAFE, LLC

**Current Principal Place of Business:**

1637 S.E 17TH STREET  
FORT LAUDERDALE, FL 33316

**New Principal Place of Business:**

**Current Mailing Address:**

1637 S.E 17TH STREET  
FORT LAUDERDALE, FL 33316

**New Mailing Address:**

1821 NE 43 STREET  
FORT LAUDERDALE, FL 33308

**FEI Number:** 65-1076623      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

CAPOT, OLIVIER  
1821 NE 43RD STREET  
FORT LAUDERDALE, FL 33308      US

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

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:** OLIVIER CAPOT

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM      (X) Delete  
**Name:** MEYER, STEPHANE  
**Address:** 813 SW 9TH TER  
**City-St-Zip:** FT LAUDERDALE, FL 33315

**Title:** MGRM      ( ) Delete  
**Name:** CAPOT, OLIVIER  
**Address:** 1821 NE 43RD STREET  
**City-St-Zip:** FT LAUDERDALE, FL 33308

**ADDITIONS/CHANGES:**

**Title:**      ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

**Title:**      ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

**SIGNATURE:** OLIVER CAPOT

MGRM

10/26/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date