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(Re	questor's Name)			
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PICK-UP	WAIT	MAIL		
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(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
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Special Instructions to	Filing Officer:			
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Office Use Only



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C. LEWIS

MAY - 6 2009

EXAMINER



April 6, 2009

CHRISTOPHER J. D'ANGELO 4595 WOODS RD E. AURORA, NY 14052

SUBJECT: DYNAMIC DOUGHNUTS REALTY OF ROUTE 1, LLC

Ref. Number: L03000041580

We have received your document for DYNAMIC DOUGHNUTS REALTY OF ROUTE 1, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6047.

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 509A00011426

COVER LETTER

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

TO:

Amendment Section

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: DYNAMIC DOUGHNUTS REALTY OF ROUTE 1, LLC (Name of Limited Liability Company)
Dear Sir or Madam:
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
CHRISTOPHER J. D'ANGOTO (Name of Person)
(Firm/Company)
4595 WOODS READ (Address)
EAST AURORA, 14 14052 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clifton Building Division of Corporations Clifton Building Clifton Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Exclosed is a check for the following amount: \$25 Filing Fee

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

in the State of Florida.			
1. Name of the limited	liability company: Dy NAM	114 DOUGHNUTS RE	ALTY OF ROUTE 1, CC
2. (a) Principal office (Note: MUST)	address of limited liability compar <u>BE STREET ADDRESS</u>)	y: SOO N.E. SAM SUITE ZUS BOCA RATON, I	USH RIVOR BZVD FZ 33486
(b) Mailing address (Note: MAY E	of limited liability company: BE POST OFFICE BOX	SUDNÉ SANIS SUITE ZOS BOCA RATUR	
	•	4030004/5	.80
3. Date of filing/registr	ration, in Florida	4. Document number	·
5. (a) Registered Age	nt and Registered Office shown or	the records of the Florida Dept. o	of State:
Registered Age	nt:	CHRISTOSHER J. T	AN GOTO
Registered Offi	ce Address:	SUITE ZOS BOCA RAYON,	USH RIVER BLUD FC 33486
(b) Enter name of NEW Registers	NEW Registered Agent and/or NE	EW Registered Office address:	EITTEN
NEW Registere	ed Office Address: ORIDA STREET ADDRESS)	BLOCK + COLL 1001 N. U.S OUPTTOR, I	
that after the change or office of the registered	ompany is not organized under the changes are made, the Florida streagent will be identical. Or, in the the change(s) was/were authorized otherwise provided in the articles my.	eet address of the registered office case of a Florida limited liability of	and the business
(Signature of a member or guill	orized representative of a member)		
	Hol J. D. D. D. Low, Man	Mor	
I hereby accept the ap comply with the provis am familiar with and a F.S. Or, if this docume confirm thay the limited	pointment as registered agent and ions of all statutes relative to the p ccept the obligations of my position is buing filed to merely reflect a lighthy company has been notification.		rther agree to of my duties and I for mc hater 608, idre CI hereby
(Signature of Registered Ager	^{nt)} Pivision of Corporations, P.O. Bo	v 6377 Tallahassaa FI 37314	THE THE THE
L	FILING FE	•	PS # O

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