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April 2, 2004

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Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Re: CF 1 Florida, L.L.C., CF 2 Florida, L.L.C., CF 3 Florida, L.L.C., CF 4 Florida, L.L.C., CF 5 Florida, L.L.C., and CF 6 Florida, L.L.C.,

Dear Sirs:

BRUCE H. NAGEL®

DAVID A. MAZIE*

ERIC D. KATZOA

COUNSEL

OF COUNSEL HERBERT I. WALDMAND

ROBERT H. SOLOMON

ADAM M. SLATER+0

DAVID M. FREEMAN4

CERTIFIED BY THE SUPREME COURT OF

OCCRETIFIED BY THE SUPREME COURT OF NEW JERSEY AS A CRIMINAL TRIAL ATTORNEY

NEW JERSEY AS A CIVIL TRIAL ATTORNEY

JAY J. RICE*

Enclosed herewith for filing are six Statements of Change of Registered Office or Registered Agent or Both, one for each of the limited liability companies referred to above. Our check in the amount of \$150.00, payable to the Florida Department of State, is enclosed to pay the filing fee.

Please return filing receipts for the enclosed to me in the stamped, self-addressed envelope provided for that purpose.

Very truly yours,

Des D'mages

Lori I. Mayer

g:\lori\Feldman\singer island\file agent changes

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.

	nited liability company is:			 *
2. The mailing address	s of the limited liability comp	oany is: 29 Boland Drive, W	est Orange,	_·
New Jersey 07052.				 .
3/16/2004		L04000020586		
. Date of filing/registration in Florida 4. Document no		4. Document number	er er	_
5. The name of the reg Florida Department		ed office address as shown on	the records of the	
	N 1191 E. Newport Cent	ame ter Drive, Suite 103		
	Deerfield Beach, FL 3	dress 3442 ite and Zip		
6. The name and addre	ess of the new registered agen	t and/or office:		
	Wilson Atkinson III, Es	sq.		
	Atkinson Diner, et al., 1946 Tyler Street Florida street address (P.O. Box NOT acceptable)		nt:	
	Florida street address (P	O. Box NOT acceptable)	*** \$.	75
	Hollywood,	_L 33020		ESS.
	City, State	e and Zip	= 5	•
confirmed that after the and the business office	te change or changes are made to of the registered agent will b	ler the laws of the State of Flore, the Florida street address of the identical. Or, in the case of lange(s) was/were authorized by	rida, it is hereby — the registered office a Florida limited	of

the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Louis mayer
(Signature of a member or authorized representative of a member)
Lori I. Mayer
(Printed or typed name of signee)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address I hereby confirm that the limited liability company has been notified in writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00