

L040000205B7

(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



200031810942

04/06/04--01068--003 **150.00

APPROVED
FILE
04 APR -5 2004
FBI

DB
4-14-04

NAGEL RICE & MAZIE, LLP

COUNSELLORS AT LAW

BRUCE H. NAGEL*
JAY J. RICE*
DAVID A. MAZIE*
ROBERT H. SOLOMON
ADAM M. SLATER**
ERIC D. KATZ**

COUNSEL
DAVID M. FREEMAN*

OF COUNSEL
HERBERT I. WALDMAN*

*CERTIFIED BY THE SUPREME COURT OF
NEW JERSEY AS A CIVIL TRIAL ATTORNEY
**CERTIFIED BY THE SUPREME COURT OF
NEW JERSEY AS A CRIMINAL TRIAL ATTORNEY

301 S. LIVINGSTON AVENUE
SUITE 201
LIVINGSTON, NEW JERSEY 07039-3991
(973) 535-3100

FAX: (973) 535-3373

NEW YORK OFFICE
230 PARK AVENUE
SUITE 1000
NEW YORK, NEW YORK 10169
(212) 551-1465

PLEASE REPLY TO
LIVINGSTON OFFICE

LORI I. MAYER*
RANDEE M. MATLOFF
DIANE E. SAMMONS*
ANDREW R. BRONSNICK
MARIA TOMBALAKIAN*
ANDREW L. O'CONNOR
JUSTIN B. KLEINMAN*

HARRY A. MARGOLIS
(1928-2002)

*MEMBER OF NJ & NY BARS
*MEMBER OF NJ & PA BARS

April 2, 2004

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:

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,

Lori I. Mayer
Lori I. Mayer

**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.

1. The name of the limited liability company is: CF 3 Florida, L.L.C.
2. The mailing address of the limited liability company is : 29 Boland Drive, West Orange,
New Jersey 07052.

3. Date of filing/registration in Florida 3/16/2004 4. Document number L04000020587

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Charles Feldman
Name
1191 E. Newport Center Drive, Suite 103
Address
Deerfield Beach, FL 33442
City, State and Zip

6. The name and address of the new registered agent and/or office:

Wilson Atkinson III, Esq.
Name
Atkinson Diner, et al., 1946 Tyler Street
Florida street address (P.O. Box NOT acceptable)
Hollywood, FL 33020
City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote 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.

Lori I. 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.

[Signature]
(Signature of Registered Agent)

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

APPROVED
AND
FILED
04 APR - 6 AM 10:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA