

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000070272

FILED
Feb 18, 2009
Secretary of State

Entity Name: BENGEL'S BURGERS II, LLC

Current Principal Place of Business:

5100 LEESBURG PIKE, SUITE 200
ALEXANDRIA, VA 22302

New Principal Place of Business:

3551 HEIRLOOM ROSE PLACE
OVIEDO, FL 32766

Current Mailing Address:

5100 LEESBURG PIKE, SUITE 200
ALEXANDRIA, VA 22302

New Mailing Address:

3551 HEIRLOOM ROSE PLACE
OVIEDO, FL 32766

FEI Number: 01-0907827

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR., SUITE 4
WESTON, FL 33331 US

Name and Address of New Registered Agent:

BENGEL, CHRISTOPHER B
3551 HEIRLOOM ROSE PLACE
OVIEDO, FL 32766 US

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: CHRISTOPHER BENGEL

02/18/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BENGEL, CHARLIE
Address: 5100 LEESBURG PIKE, SUITE 200
City-St-Zip: ALEXANDRIA, VA 22302

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: MGR () Change (X) Addition
Name: BENGEL, CHRISTOPHER B
Address: 3551 HEIRLOOM ROSE PLACE
City-St-Zip: OVIEDO, FL 32766

I hereby certify that the information supplied with this filing does not qualify 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: CHARLIE BENGEL

MGR

02/18/2009

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