# U3000025223

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT	MAIL	
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of S	tatus	
Special Instructions to Filing Officer:		

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B. BOSTICK
DEC - 3 2013
EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporat	ions		
SUBJECT: Brookk	M Water Name of Limited	Bagel Co. No d Liability Company	.3, (((
Dear Sir or Madam:			
The enclosed Registered Ag	ent/Registered Office (	Change and fee(s) are submitted	l for filing.
Please return all corresponde	ence concerning this m	atter to the following:	
	na Starb		
Brooklyn Wo	ater Enter	rprises	ZBIB DEC
5355 Tour		Ra. S. 702	-2 Ph F
BOCH RATUR			
Christana E-mail address: (to be used for	6 brookly	n water bagels.	·Com
For further information cond	erning this matter, plea	ase call:	
Christian Name of Person	à Starb ar (	5(4) 455- Area Code & Daytime Telephor	2490 ne Number
STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, Florida 32	ns · Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check	for the following amo	ount:	
□ \$25 Filing Fee		□ \$55 Filing Fee & Certified	l Conv

## 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.

agent, or both, in the State of Florida.	
1. Name of the limited liability company: Brooklyw	WATER BAUEL CO. NO. 3, LLC.
2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	5355 TOWN CENTER Rd. 5. 702 BOLA RATON, FL 33486
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	5355 TOWN CLUTER RD. 5.702 BOLA LATON, FL 33486
2/14/13	613000025223
3. Date of filing/registration in Florida	1. Document number
5. (a) Registered Agent and Registered Office shown on the	ne records of the Florida Dept. of State:
Registered Agent:	JONATHAN D. MORGENSTERN
Registered Office Address:	BOX RATION, FL 33486
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :  NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	V Registered Office address:  LHRIGTIANA STAIG  SSSS TOWN CRATER RO., STE 700  BOCA RATON, FL 33486  FL
MOST BE TECKTON STREET ADDRESS	,FL
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Floand the business office of the registered agent will be identicable to company it is hereby confirmed that the change(s) the members of the limited hability company or as otherwise the operating genericant of the limited hability company.  Signature of a member or authorized representative of member	aws of the State of Florida, it is hereby orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote of e provided in the articles of organization or
STEVEN M. FASSBERG, MGR	SS 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Printed or typed name of signee	Touth Warmen
I hereby accept the appointment as registered agent and ag comply with the provisions of all statutes relative to the pro and I am familiar with and accept the obligations of my pos Chapter 608, F.S. Or, if this document is being filed to mer address. I hereby confirm matthe limited liability company	ree to act in this capacity. : I further agree to per and complete performance of my duties, ition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Ageny



### FLORIDA DEPARTMENT OF STATE Division of Corporations

October 30, 2013

CHRISTIANA STAIB BROOKLYN WATER BAGEL CO. NO. 3, LLC 5355 TOWN CENTER ROAD, SUITE 702 BOCA RATON, FL 33486

SUBJECT: BROOKLYN WATER BAGEL CO. NO. 3, LLC.

Ref. Number: L13000025223

We have received your document for BROOKLYN WATER BAGEL CO. NO. 3, 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):

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

Please return 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) 245-6051.

Barbara Bostick Regulatory Specialist II

Letter Number: 713A00025303

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### FLORIDA DEPARTMENT OF STATE Division of Corporations

November 8, 2013

CHRISTIANA STAIB BROOKLYN WATER BAGEL CO. NO. 3, LLC 5355 TOWN CENTER ROAD, SUITE 702 BOCA RATON, FL 33486

SUBJECT: BROOKLYN WATER BAGEL CO. NO. 3, LLC.

Ref. Number: L13000025223

We have received your document for BROOKLYN WATER BAGEL CO. NO. 3, LLC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

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

Please return 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) 245-6051.

Barbara Bostick Regulatory Specialist II

Letter Number: 613A00026083