

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000043034

**FILED**  
**Feb 26, 2014**  
**Secretary of State**  
**CC7154409828**

**Entity Name:** BENGEL'S BURGERS III, LLC

**Current Principal Place of Business:**

1316 EAST MICHIGAN ST.  
ORLANDO, FL 32806

**Current Mailing Address:**

1316 EAST MICHIGAN ST.  
ORLANDO, FL 32806 US

**FEI Number:** 26-4103981

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BENGEL, CHRISTOPHER B  
3551 HEIRLOOM ROSE PL  
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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGR  
Name BENGEL, CHARLES W  
Address 5061 POLK AVE  
City-State-Zip: ALEXANDRIA VA 22304

Title MGRM  
Name BENGEL, CHRISTOPHER B  
Address 3551 HEIRLOOM ROSE PL  
City-State-Zip: OVIEDO FL 32766

Title MGRM  
Name BENGEL, CHARLES W  
Address 18831 KIPHEART DR  
City-State-Zip: LEESBURG VA 20176

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** CHRISTOPHER BENGEL

**MGRM**

**02/26/2014**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date