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ACCOUNT NO. : 072100000032

REFERENCE : 380538

4716061

AUTHORIZATION >

COST LIMIT

ORDER DATE : September 11, 2006

ORDER TIME : 1:19 PM

ORDER NO. : 380538-150

CUSTOMER NO: 4716061

FOREIGN FILINGS

NAME: WHATABURGER REAL ESTATE LP

XXXX QUALIFICATION (TYPE: LP)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Matthew Young -- EXT# 2962

EXAMINER:

APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP TO TRANSACT BUSINES IN FLORIDA

| APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP | CER 19 PM F. 2 |
|---|--|
| TO TRANSACT BUSINES IN FLORIDA | S Profile |
| 1. Whataburger Real Estate LP | 2 3 O |
| (Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix) Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP. | in the second se |
| N/A | |
| (If name unavailable, name under which the limited partnership or limited liability limited partnership proposes to register to transact business in Florida; must contain acceptable suffix.) | EFFECTIVE DATE |
| 2. Texas 3. September 11, 2006 | -112/2/1/6- |
| (State or Country of Formation) (Date of Formation) | |
| 4. Corporation Service Company | |
| (Name of Registered Agent for Service of Process) | • |
| 5 1201 Hays Street | |
| (Florida street address for Registered Agent) | • |
| Tallahassee, FL 32301 | |
| 6. 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 an accept the obligations of my position as registered agent. | • |
| By: Cynthia L. Harris By: Cynthia L. Harris as its agent | |
| 7. One Whataburger Way Corpus Christi, TX 78411-2981 | |
| (Principal office address) | |
| | |

Page 1 of 3

| 9(Mailing address) | | | |
|--|---|--|--|
| 10. Name, principal office address, and mailing address of each general partner: | | | |
| Whataburger Management LLC (Name) WIL UUUU 4995 | One Whataburger Way (Street Address) Corpus Christi, TX 78411 | | |
| | (Mailing Address) | | |
| (Name) | (Street Address) | | |
| | (Mailing Address) | | |
| (Name) | (Street Address) | | |
| | (Mailing Address) | | |
| (Name) | (Street Address) | | |
| | (Mailing Address) | | |

| (Name) | (Street Address) |
|--|--|
| | (Mailing Address) |
| (Name) | (Street Address) |
| | (Mailing Address) |
| 11. Effective date, if other than the date of (Effective date cannot be prior to no filed by the Florida Department of S | or more than 90 days after the date this document is |
| to the delivery of this application to | ence duly authenticated, not more than 90 days prior the Florida Department of State, by the Secretary of ly of the entity's records in the jurisdiction under the |
| Signed this 8th day of | of <u>September</u> , 20 <u>06</u> . |
| Signature of a general partner: | |
| Filing Fees: Certified Copy (optional): Certificate of Status (optional): | \$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) \$52.50 \$8.75 |

Corporations Section •P.O.Box 13697 Austin, Texas 78711-3697 Roger Williams Secretary of State

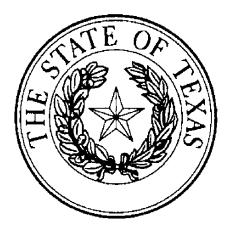


Office of the Secretary of State

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Whataburger Real Estate LP (filing number: 800705650), a Domestic Limited Partnership (LP), was filed in this office on September 11, 2006.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on September 13, 2006.



Roger Williams

Secretary of State

Phone: (512) 463-5555 Prepared by: SOS-WEB Come visit us on the internet at http://www.sos.state.tx.us/ Fax: (512) 463-5709

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