**CT** CORPORATION SYSTEM CORPORATION(S) NAME RCSH Operations, LLC () Profit () Amendment () Merger () Nonprofit Ø Foreign () Dissolution/Withdrawal () Mark () Reinstatement () Limited Partnership () Annual Report () Other ₩LLC () Name Registration () Change of RA () Fictitious Name () UCC () Certified Copy () Photocopies () CUS () Call When Ready () Call If Problem () After 4:30 (x) Walk In () Will Wait (x) Pick Up () Mail Out Name 12/29/00 Order#: 3491591 Availability \_\_\_ Document Examiner Ref#: Updater \_\_\_ Verifier W.P. Verifier Amount: \$

> 400003517344--8 -01/02/01--01001--010 \*\*\*\*125.00 \*\*\*\*125.00

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615





## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	(Name of foreign lim	ited liability company)
Louisiana	3.	_72-1490168
(Jurisdiction under the law of which for company is organized)	tign limited liability	72-1490168 (FEI number, if applicable)
12/11/2000	5.	Perpetual
(Date of Organization)	<del></del>	(Duration: Year limited liability company will cease to exist or "perpenui")
nbor distriction		
(Date first transacted but	siness in Florida. (See se	ctions 508.501, 608.502, and 817.155, F.S.)
3321 Hearmer Avenue		
Metairie, LA 70002		
	(Street address of	principal office)
If limited liability company is a n	nanaper-managed co	mosny, check here
ti imilion income, company to a	manager manages vo.	nipani, mean nere XX
The usual business addresses of t	he managing membe	ers or managers are as follows:
3321 Hessmer Avenue		
Metairie, LA 70002		
Attached is an original certificate of existe	nce, no more than 90 day	sold, duly authenticated by the official having custody of rec
jurisdiction under the law of which it is org relation of the certificate under ooth of the t	puized (Aphotocopyis	nor acceptable. If the certificate is in a foreign language, a
	DESCRIPT THE STOC STREET	S(L)
	o be conducted or pro	•
. Nature of business or purposes to	_	•
. Nature of business or purposes to	_	•
. Nature of business or purposes to	_	•
Nature of business or purposes to  Full Service Restau	fants member or an author	omoted in Florida:
Nature of business or purposes to  Full Service Restant  Signature of a (In accordance with	member or an author	omoted in Florida:

Typed or printed name of signee

FLOT - 1711/99 CT Symma Ordina

OODEC 29 PM 4: 00
SECRETARY OF STATE
OUT AHASSEE FLORIDA

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1.	The name of the Limited Liability Company is:		
R	CSH Operations, LLC		
2.	The name and the Florida street address of the registered agent and office are:		
C T Corporation System			
	(Name)		
c/o C T Corporation System, 1200 South Pine Island Road  Florida street address (P.O. Box NOT ACCEPTABLE)			
	Fibrida sit est audiess (1.0. Sov_Issex 700ss 111sbs)		
	Plantation FL 33324		
	City/State/Zip		

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating 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..

C T Corporation System

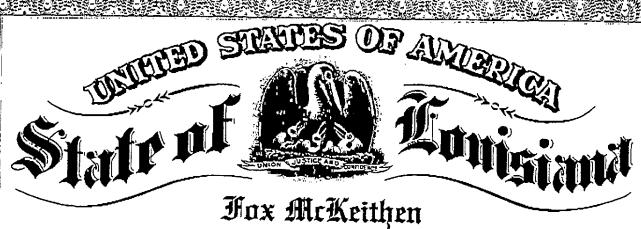
VICTOR ALFANO

ASSISTANT SECRETARY

(Stignature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

TEC 29 PH 4: 00
TETARY OF STATE
WHASSEE, FLORIDA



SECRETARY OF STATE

As Secretary of State, of the State of Louisiana. I do hereby Certify that

the Articles of Organization of

RCSH OPERATIONS, LLC

Domiciled at BATON ROUGE, LOUISIANA,

Were filed in this Office and a Certificate of Organization was issued on December 11, 2000,

I further certify that no Certificate of Dissolution has been issued.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

December 27, 2000

ABA 35012938K Secretary of State SECRETARY OF STATE
TALL AHASSEE, FLORIDA