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To:

Division of Corporations

Fax Number : (850)617-6383

From: .

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (850)222-1092 fax Number : (850)878-5368

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

FLORIDA/FOREIGN LIMITED LIABILITY CO.

TRG EL Scorpion of Miami, LLC

G 415 4 50	
Certificate of Status	<u></u> _
Certified Copy	
Page Count	05
Estimated Charge	\$160.00

S. HAWKES JAN 4 2010 **EXAMINER**

COVER LETTER

SUBJECT:	TRG EL	. Scorpion of Miami, LLC	,
dinvect.		Name of Limited Liability Company	
The enclosed "Application of the Existence, and the	plication by Foreign Limited L ock are submitted to register th	iability Company for Authorization to above referenced foreign limited lia	o Transact Business in Florida," Certificate o bility company to transact business in Plorid
Please return all co	prespondence concerning this	matter to the following:	
_		Kavin Boughey	
		Name of Person	
_	Turi	ntable Restaurant Group, Lt	C
		Firm/Company	
		388 Chesterfield Way	
	-	Address	
		Simpsonville, KY 40067	
•		City/State and Zip Code	······································
	kb	oughey@maximprime.com	
	E-mail address:	(to be used for future annual report a	olification)
For further informat	tion concerning this matter, pl	case call:	
	Joshua French	Area Code & Daytime Teleph	535-4028
	Name of Person	Area Code & Daytime Teleph	one Number
Division of Registration		STREET ADDRESS; Division of Corporations Registration Section	
P.O. Box 6 Tallahasses	327 s, FL 32314	Clifton Building 2661 Executive Center Circle Taliahassee, FL 32301	
Enclosed is a che	ek for the following amo	unt:	
\$125.08	Filing Foc \$130.00 Fill Certificate	ng Peo & S135.00 Filing Fee & Cartified Copy	\$160.00 Filing Fee, Certificate of Status & Contified Copy

Application by Foreign Limited Liability company for authorization to
TRANSACT BUSINESS IN PLORIDA
APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN PLORIDA IN COMPLIANCE WITH SECTION SHISES FLORIDA STATEOFFICIALS. IN THE FOLIOWER IN SUMMENT TO TRANSACT BUSINESS IN THE STATEOFFICIALS. TRG EL Scorpion of Miami, LLC (Nume of Foreign Limited Limbility Company; must include "Limited Unbility Company," "L. L.C.," or "L.C.," or "L
1. TRG EL Scorplon of Mlami, LLC
(Nume of Foreign Limited Limited Limited Limited Chaptery, "L. L.C.," or "L.C.," or "L.C.,"
(If name unavailable, onter alternate name adopted for the purpose of transacting business in Florida and areads a copy of the written consent of the managers or managing members adopting the atternate name. The alternate name must leaded "Limited Liability Company," "L.C.C." "L.C.C."
2. Dalawarn 3. 27-1561003
Dalaware 3. 27-1561003 Divisification finder the law of which foreign lithited liability company is organized)
Lecember 21, 2009
(Oute iii (Franization) (Duration; Year limited lightlifty company will cease to
exist or "perpotted")
(Date first transacted business in Provide, If prior to registration.)
(Date first transacted business in Florida, if prior to registration.) (See sections 608.307 & 608.502 F.S. to determine possity liability)
388 Chesterfield Way
Simpsonvilla, KY 40067
(Street Address of Principal Office)
. If limited liability company is a manager-managed company, check here
. The name and usual business addresses of the managing members or managers are as follows:
Turnlable Restaurant Group, LLC
368 Chesterfield Way
400 010000111111 11111
Simpsonville, KY 40087
). Attached is an original conflicate of cristman no more than 90 days old, duly authenticated by the official having custody of records in a jurisdiction under the law of which it is organized, (A photocopy is not acceptable, (I the conflicate is in a foreign language, a relation of the conflicate under cath of the translator must be admitted.)
. Nature of business or purposes to be conducted or promoted in Florida: operation of
full service restaurants
a sala
Signature of a member or an authorized representative of a member.
(in necessions with section 603.406(3), P.B., the execution of this document constitutes an affirmation tender the population of perjury that the floor stated introls are true.)
Dan Smith - Authorized Representative

Typed or printed name of signes

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.

	ES 3
1. The name of the Limited Liability Company is:	題時
TRG EL Scorpion of Miami, LLC	
If unavailable, the alternate to be used in the state of Florida is:	PARTE SE
2. The name and the Florida street address of the registered agent and office are:	97
C T Corporation System	•
(Name)	
1200 South Pine Island Road Plorida Strest Address (P.O. Box NOT ACCEPTABLE)	
	,
Plantation FL 33324	
City/State/Zip	
Having been named as registered agent and to accept service of process for the above stated liability company at the place designated in this certificate, I hereby accept the appointment agent and agree to act in this capacity. I further agree to comply with the provisions of all s relating to the proper and complete performance of my duties, and I am familiar with and accobligations of my position as registered agent as provided for in Chapter 608, Florida Status C T Corporation System	t as registered statutes ccept the

Filing Fee for Application

Certified Copy (optional)

Designation of Registered Agent

Certificate of Status (optional)

\$ 100.00

\$ 25.00

\$ 30,00

5.00

Kristen Betzger Gignatur Vice President

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TRG EL SCORPION OF MIAMI, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTIETH DAY OF DECEMBER, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

FILED 90EC 31 PM 1: 56 SECRETARSE EFFLORIES

4768026 8300

001152246

You may verify this certificate online at our delaware gov/authwer, shtul

Jeffrey W. Bullock, Secretary of State

DATE: 12-30-09