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Special Instructions to Filing Officer:				
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K.SALY EXAMINER MAR 28 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

AUTHORIZATION

ACCOUNT NO. : I2000000195

REFERENCE : 077883 7483879

COST LIMIT : 5 125.00

ORDER DATE: March 25, 2016

ORDER TIME : 3:32 PM

ORDER NO. : 077883-020

CUSTOMER NO: 7483879

FOREIGN FILINGS

NAME: A3 RESTAURANT DEVELOPMENT, LLC

XXXX QUALIFICATION (TYPE: <u>LL</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT RUSINESS. IN THE STATE OF FLORIDA.

1. A3 Restaurant Develop (Name of Fore	eign Limited Liability Company; must include "Limited	Liability Company," "L.L.C.," or "	LLC.")
(If name unavailable, enter al	ternate name adopted for the purpose of transacting bus	siness in Florida. The alternate name	must include "Limited
Liability Company," "L.L.C," 2. Delaware	•		
2. Delawate (Jurisdiction under the law	of which foreign limited liability 3. pending	(FEI number, if applicable)	
company is organized)		(* 2. nament (* approacte)	
4. upon qualification			
	(Date first transacted business in Florida, if pri (See sections 605.0904 & 605.0905, F.S. to deter	or to registration.) mine penalty liability)	
5. 4000 Island Boulevard	, PH-2		
Aventura, FL 33160		•	- 2
	(Street Address of Principal Office)		
6. 4000 Island Boulevard,	, PH-2		206 PAR
Aventura, FL 33160			25
744cmaa, 1 & 33100	(Mailing Address)		32
7 Name and street address	ss of Florida registered agent: (P.O. Box NOT ac	oantahla)	明 王 口
7. Name and street address	Corporation Service Company	ceptaote)	8: 46 8: 46
Name:			
Office Address:	1201 Hays Street	- Market Marrier	
	Tallahassee	, Florida 32301	
	(City)	(Zip code)	
this application, I hereby	gistered agent and to accept service of process for accept the appointment as registered agent and a statutes relative to the proper and complete perfo	ngree to act in this capacity. I formance of my duties, and I am	urther agree to comply
	(Registered agent's signat	ure) Asst.	Vice President
8. The name, title or capa	acity and address of the person(s) who has/have au	thority to manage is/are:	
TG CO Management, Inc		, ,	
4000 Island Boulevard, P	H-2		na' d l nd lan a n'
Aventura, FL 33160	MARCH.		······································
9. Attached is a certificate	of existence, no more than 90 days old, duly auth of which it is organized. (If the certificate is in a fubmitted)	oreign language, a translation of	
In accordance with costic			the nanalties of names that
	on 605.0203, F.S., the execution of this document of true. I am aware that any false information submit for in s.817.155, F.S.)		

Typed or printed name of signee

Richard Feldman

Page 1

<u>Delaware</u>

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "A3 RESTAURANT DEVELOPMENT, 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 TWENTY-FIFTH DAY OF MARCH, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "A3 RESTAURANT DEVELOPMENT, LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF MARCH, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

2016 MAR 25 AH 8: 46

Authentication: 202044854

Date: 03-25-16

5994668 8300 SR# 20161881327

You may verify this certificate online at corp.delaware.gov/authver.shtml