

BO7000000155

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

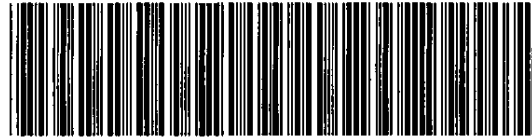
Special Instructions to Filing Officer:

5-10
CWS

1789, 611, 657, 671

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W07-20847



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Shula's Steak Houses, LLLP

(Name of Foreign Limited Partnership or Limited Liability Limited Partnership)

The enclosed application, certificate of status and fees are submitted to register a foreign limited partnership or limited liability limited partnership to transact business in Florida. Please return all correspondence concerning this matter to:

Deborah Love

(Contact Person)

Friedman, Rosenwasser, & Goldbaum P.A.

(Firm/Company)

5355 Town Center Road, Suite 801

(Address)

Boca Raton, Florida 33486

(City, State and Zip Code)

For further information concerning this matter, please call:

Deborah Love

(Name of Contact Person)

at (561) 395-5511

(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee)	☐ \$1,008.75 Filing Fees and Certificate of Status	☐ \$1,052.50 Filing Fees and Certified Copy	☐ \$1,061.25 Filing Fee, Certified Copy, and Certificate of Status
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STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 27, 2007

DEBORAH LOVE
5355 TOWN CENTER ROAD, STE 801
BOCA RATON, FL 33486

SUBJECT: SHULA'S STEAK HOUSES, LLLP
Ref. Number: W07000020547

We have received your document for SHULA'S STEAK HOUSES, LLLP and your check(s) totaling \$1000.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

The effective date must be specific and cannot be prior to the date of filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas
Document Specialist

Letter Number: 007A00028948

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

**APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR
LIMITED LIABILITY LIMITED PARTNERSHIP
TO TRANSACT BUSINESS IN FLORIDA**

1. Shula's Steak Houses, LLLP

(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.

(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.)

2. Delaware

(State or Country of Formation)

3. 07/29/1998

(Date of Formation)

4. Corporate Creations International, Inc.

(Name of Registered Agent for Service of Process)

5. 11380 Prosperity Farms Rd., #221-E

(Florida street address for Registered Agent)

Palm Beach Gardens, Florida 33410

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 and accept the obligations of my position as registered agent.*

D.E. Cammarata VP
Signature of Registered Agent

7. 6843 Main Street, Miami Lakes, FL 33014

(Principal office address)

8. If limited partnership is a limited liability limited partnership, check box ☒

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TALLAHASSEE, FLORIDA

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

11. Effective date, if other than the date of filing: _____

(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to the delivery of this application to the Florida Department of State, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under the law of which it is organized.

Signed this 17th day of APRIL, 20 07.

Signature of a general partner:



Dave Shula, Manager and President
of Shula Sports, LLC

Filing Fees:	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)
Certified Copy (optional):	\$52.50
Certificate of Status (optional):	\$8.75

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TALLAHASSEE FLORIDA

9. 6843 Main Street, Miami Lakes, FL 33014

(Mailing address)

10. Name, principal office address, and mailing address of each general partner:

Shula Sports, LLC

(Name)

198-962

6843 Main Street

(Street Address)

Miami Lakes, FL 33014

(Mailing Address)

(Street Address)

(Mailing Address)

(Street Address)

(Mailing Address)

(Street Address)

(Mailing Address)

(Name)

(Name)

(Name)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SHULA'S STEAK HOUSES, LLLP" 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 TENTH DAY OF APRIL, A.D. 2007.



2927137 8300

070391069

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5579061

DATE: 04-10-07