

**B19000017963**

**Florida Department of State  
Division of Corporations  
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**To:**  
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 Fax Number : (850) 617-6383

**From:**  
 Account Name : CAPITOL SERVICES, INC.  
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**FLORIDA/FOREIGN LP/LLLP  
BOSTON PIZZA RESTAURANTS, LP**

**\*\*\*PLEASE FILE AFTER THE QUALIFICATION OF BPR GP, LLC\*\*\***

**\*\*\*PLEASE PROVIDE ORIGINAL SUBMISSION DATE OF 6/6/19\*\*\***

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June 7, 2019

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

CAPITOL SERVICES, INC.

SUBJECT: BOSTON PIZZA RESTAURANTS, LP  
REF: W19000054677

\*\*\*PLEASE FILE AFTER  
THE QUALIFICATION OF  
BPR GP, LLC\*\*\*

\*\*\*PLEASE PROVIDE  
ORIGINAL SUBMISSION  
DATE OF 6/6/19\*\*\*

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability limited partnership must have an active registration/filing on file with this office before this filing can be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

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) 245-6051.

Karen A Saly  
Regulatory Specialist II

FAX Aud. #: H19000179636  
Letter Number: 619A00011437

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

BOSTON PIZZA RESTAURANTS, LP

(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.P. or L.L.P.

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. 12/21/2001 Date of Formation

4. Federal Employer Identification Number: 75-2968915

5. Name of Registered Agent for Service of Process and Florida Street Address:

C T Corporation System 1200 South Pine Island Road Plantation, FL 33324

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.

Signature of Registered Agent Scott White Assistant Secretary

7. Principal Office: 14850 Quorum Drive Suite 201 Dallas, Texas 75254

8. Mailing Address: 14850 Quorum Drive Suite 201 Dallas, Texas 75254

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9. If limited partnership is a limited liability limited partnership, check box. [ ]

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

Name of General Partner: BPR GP, Inc. Name of General Partner: Street Address: 14850 Quorum Drive, Suite 201 Dallas, Texas 75254 Street Address: Mailing Address: 14850 Quorum Drive, Suite 201 Dallas, Texas 75254 Mailing Address: Name of General Partner: Name of General Partner: Street Address: Street Address: Mailing Address: Mailing Address:

Name of General Partner: \_\_\_\_\_ Name of General Partner: \_\_\_\_\_  
 Street Address: \_\_\_\_\_ Street Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Mailing 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.)*  
 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 6th day of June, 2019



Richard Lauro, Secretary of the General Partner

Signature of a general partner

The individual signing this document affirms that the facts stated herein are true and the individual is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

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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# Delaware

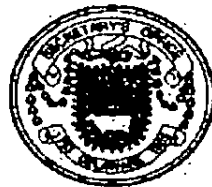
The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BOSTON PIZZA RESTAURANTS, LP" 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 SIXTH DAY OF JUNE, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BOSTON PIZZA RESTAURANTS, LP" WAS FORMED ON THE TWENTY-FIRST DAY OF DECEMBER, A.D. 2001.

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

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2019 JUN -6 A 9:10  
DELAWARE SECRETARY OF STATE



*Jeffrey W. Bullock*  
Jeffrey W. Bullock, Secretary of State

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You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

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