ACCESS,

236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

PICK III	WALK IN 4/15/99/11:00 E	99 NPR	OFFICE OF THE PROPERTY OF THE
CERTIFIED COPY	cus		FEB STATE
YPHOTO COPY	FILING	Foreign Lta	JH JHS
1.) Rotounkt Kitchen LP (CORPORATE NAME & DOCUMENT#)		70000283983 -7000028398 -04/15/99010 ****735.00 *	371)32016
2.)(CORPORATE NAME & DOCUMENT #)	File Secon		***735.00
(CORPORATE NAME & DOCUMENT #)		99	### ### ### ##
(CORPORATE NAME & DOCUMENT #)		APR 15	
(CORPORATE NAME & DOCUMENT #) SPECIAL INSTRUCTIONS			Т
	bk	4/5/99	

Florida Department of State, Sandra B. Mortham, Secretary of State

APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

1	Rotpunkt Kitchen LP				S 86	
	(Name of limited partnership as it is in the home state) (If name is unavailable, name under which the limited partnership proposes to register or transact business in					
2						1.
	(If name is unavailable, name under wh	ich the limited p	artnership propose	es to register or	transact business in	ı Ç
	Fiorida; mus	st contain the wo	ord "LIMITED" or	"LID.")		
3.	Georgia	4	February	y 25, 1999		_
	(State of Formation)		(Date of Fo	ormation)		
5			Complex of Durance			
	(Name of Regis	lered Agent for	Service of Process))		
_	526 E Diáit A-i-					
6	526 E. Park Aver (Street Add	lue lress of Register				
	•	•	,			
-	- <u>Tailahassee</u>		, Flo	orida	32301	-
	(City)			(Z	ip Code)	
7. A	cceptance by the Registered Agent for Serv	ice of Process.		-		
	-010		-7-17-7			
	faity or Ha	gman, a	n on this line)	<u>y </u>		
	, 0	Milcer must sig	n on this line)	U		
8			The state of the s	· <u>·</u>		
	526 E. Park Avenue,	Tal1	ahassee, FL	32301		
	(Address of registered office required in	state of formation	on or, if not require	d, address of pr	incipal office.)	-
9. N	IAME OF GENERAL PARTNERS	-	STREET	ADDRESS		
See	e 1 in Addendum					
				···		
	A. 200 (2014)					
10.	1230 Peachtree	St., NE, S	uite 3100, A	tlanta, GA	30309	· · · · · · · · · · · · · · · · · · ·
	(Office where Names, Addr	esses and Contr	ibutions of Limite	d Partners are l	(ept.)	
11.	The limited partnership will undertake	to keep the re	ecords listing the	addresses and	l capital contribution	ons of the
	limited partner or limited partners until the					
	withdrawn.		-	***		_

12. 8871 Brig	hton Lane	.			
Bonita Sp	orings, FL 3413	35			
	(Mailing A	ddress of Limited	l Partnership)		
Under penalties of perjury and that the facts stated he	I, being duly sworn, de	eclare that I have	read the foregoing a	nd know the conten	ts thereof
This <u>13th</u> day of _	April		, 19, 99		
		Øeneral Pa	1 / Ly		OF SECRETARY OF CURPORATIONS 99 APR 15 PM 1: 04
	ROTPUN	K KITCHEN MA	NAGEMENT, INC	, Secretary	PA SEE
STATE OF Georgia					ज व्य
					2 300
COUNTY OF Fulton	-				· ·
					4 07
On this <u>13th</u>	day of April	, 19 <u>99</u>	 , .		-
ROTPUNK KITCHEN MA	NACEMENT THE				
ROTTONK KITCHEN MA	MAGEMENI, INC		personally ap	peared before me,	
who is personally know.	n to me				
□ whose identity I proved	on the basis of				
				·	
1 //	Way.				
$\underline{\mathcal{L}}$	(Notary P	ublic Signature)			, tas
	•	,			
	Maria T.	Hauser			
_		Printed Name)		- P	
Seal	My Commissio	on Expires: 4/	13/02		

Addendum

1. Name:

Rotpunkt Kitchen Management,

Address:

Inc., 1230 Peachtree St., NE, Suite 3100, Atlanta, GA 30309

F99000061957

SCORIOR STATIONS

AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR FOREIGN LIMITED PARTNERSHIP

BEFORE ME the undersigned personally appeared <u>Hans-Michael K</u>	raus. Sec	cretary of	Rotpunkt Kitchen
2 Potnumbt Pitches ID	, a (an)		Management, Inc
limited partnership, hereinafter referred to as the "Partnership", who certifie	s as follows:		
1. The amount of capital contributions of the limited partners is \$_none	yet		
2. The anticipated amount of the capital contributions of the limited partners		,	
transacting business in Florida is \$ 100,000 (estimated)	s mar are allo	cated for the pun	oses of
uansacting business in Fiorida is \$		-	· · •
Under the penalties of perjury I, being duly sworn, declare that I have read	the foregoing	3 and know the co	ontents thereof and
that the facts stated herein are true and correct.			0
			95 N.S.
This 13th day of April , 19 99		-	ECRETA ISIDITO 39 APR
ROTPUNKT KITCHEN MANAGEMENT,	INC.		2 97-
_ ^ / / /			5 EEE
By:		<u> </u>	32
General Partner Name/Title:Hans-Michael Krau	s, Secret	tary	- 22
Coordia			9 5
STATE OF Georgia			<u> </u>
COUNTY OF Fulton			
On this 13th day of April		19	
usy VI	<u> </u>	,-19 <u></u>	·
Hans-Michael Kraus , per	sonaliv appea	red before me.	
<u> </u>			
who is personally known to me			
whose identity I proved on the basis of			-c. .
	. "" _		English to the second of the
· 0			
Whilause			· · · · · · · · · · · · · · · · · ·
(Notary Public Signature)	** →, - -	- Fn	e to comb control of the second
Maria T. Hauser (Notary's Printed Name)			
Windle Cammo Campy			

Seal

My Commission Expires: 4/13/02