EORPOIDS GMO 0000 2022

| CORPORATION(S) NAME | | SSE P |
|--|--|---------------------------------------|
| Street Eats Limited, Inc. | | File of D |
| 0 | | POST I |
| | | |
| | # 2 ° cs | 400004010684 |
| | | |
| () Profit | () Amendment | () Merger |
| () Nonprofit () Foreign | () Dissolution/Withdrawal () Reinstatement | () Mark |
| () Limited Partnership () LLC | () Annual Report () Name Registration () Fictitious Name | () Other () Change of RA () UCC |
| () Certified Copy | () Photocopies | () CUS |
| () Call When Ready (x) Walk In () Mail Out | () Call If Problem () Will Wait | () After 4:30 (x) Pick Up |
| Name Availability | 4/16/01 | Order#: 4087306 |
| Document Examiner | | Ref#: |
| Updater Verifier W.P. Verifier | Mre | Amount: \$ |
| 660 East Jefferson Street | | TO PAIN |

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

A CONTECAL INSORMATION SERVICES COMPANY

| APPLICATION BY FOREIGN CORPORATION BUSINESS IN | |
|---|--|
| IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATE REGISTER A FOREIGN CORPORATION TO TRANSACT BUS | TUTES, THE FOLLOWING IS SUBMITTED TO SINESS IN THE STATE OF FLORIDA. |
| Street Eats Limited, Inc. (Name of corporation; must include the word "INCORPORATED" words or abbreviations of like import in language as will clearly included in the name at present a person or partnership if not so contained in the name at present a present a person or partnership. | licate that it is a corporation instead of a |
| 2. Minnesota 3. | 41-1976692 |
| (State or country under the law of which it is incorporated) | (FEI number, if applicable) |
| | n: Year corp. will cease to existor "perpetual") |
| , | n. Tear corp. will cease to exist or perpettiar") |
| 6. Upon qualification (Date first transacted business in Florida.) (SEE SECTIONS | 607.1501, 607.1502 and 817.155, F.S.) |
| 7. 2626 West Lake Street | |
| Minneapolis, MN 55416 | |
| (Current mailing address) | |
| Conoral huginage suspense | |
| 8. General business purposes (Purpose(s) of corporation authorized in home state or country) | y to be carried out in state of Florida |
| 9. Name and street address of Florida registered agent: (P. | • |
| Name: CT Corporation System | |
| Office Address: 1200 South Pine Island Road | |
| Office Address. 1200 South Fine Island Road | |
| Plantation | _, Florida, 33324 |
| | (Zip code) |
| 10. Registered agent's acceptance: | |
| Having been named as registered agent and to accept service of procthis application, I hereby accept the appointment as registered agent with the provisions of all statutes relative to the proper and complete the obligations of my position as registered agent. C T Corporation System | and agree to act in this capacity. I further agree to comply performance of my duties, and I am familiar with and accept |
| (Registered agent's signal Kevin D. Lumberg, Asst. V.P. | |
| 11. Attached is a certificate of existence duly authenticated, not more | han 90 days prior to delivery of this application to the |

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable) FL019 - 9/2/99 CTSystem Online

which it is incorporated.

Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of

| A. DIREC | TORS (Street address only - P.O. Box NOT acceptable) | SECRETARY 16 |
|--------------|--|--------------|
| Chairman: | N/A | ASSE OF TO |
| | | 100 |
| Vice Chain | man: N/A | 7 |
| | | |
| _ | William E. Weisman | |
| Address: _ | 2626 W. Lake Street | - |
| _ | Minneapolis, MN 55416 | |
| Director: _ | | |
| | | |
| B. OFFIC | CERS (Street address only - P.O. Box NOT acceptable) | <u></u> |
| President: _ | Mark L. Wilson | |
| Address: _ | 2626 W. Lake Street | |
| | Minneapolis, MN 55416 | |
| Vice Preside | ent: James George | |
| | 2626 W. Lake Street | |
| | Minneapolis, MN 55416 | |
| Secretary: _ | William E. Weisman | |
| Address: | 2626 W. Lake Street | |
| | Minneapolis, MN 554!6 | |
| Treasurer: | | |
| Address: | 2626 W. Lake Street | |
| | Minneapolis, MN 55416 | |
| NOTE: If | necessary you may attach an addendum to the application listing additional officers and/or direc | tors. |
| 13 | (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application | |
| 14 | Diane Chihi, Treasurer | on) |
| | (Typed or printed name and capacity of person signing application) | |

state of Minnesota

SECRETARY OF STATE

OT APR 16 PH 1: 48
SECRETARIST OF STATE
AND ANASSEE FLORIDA

Certificate of Good Standing

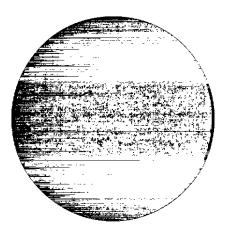
I, Mary Kiffmeyer, Secretary of State of Minnesota, do certify that: The corporation listed below is a corporation formed under the laws of Minnesota; that the corporation was formed by the filing of Articles of Incorporation with the Office of the Secretary of State on the date listed below; that the corporation is governed by the chapter of Minnesota Statutes listed below; and that this corporation is authorized to do business as a corporation at the time this certificate is issued.

Name: Street Eats Limited

Date Formed: 06/07/2000

Chapter Governed By: 302A

This certificate has been issued on 04/13/01.



Mary Kiffmager
Secretary of State.