

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000058211 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

RE-SUBMIT

From:

Account Name

C T CORPORATION SYSTEM C TOTAL

Account Number : FCA000000023

Phone Fax Number : (850)222-1092 : (850)878-5368 date of submission also

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:	

FOREIGN PROFIT/NONPROFIT CORPORATION LAST CALL OPERATING CO II., INC.

Certificate of Status	0
Certified Copy	0
Page Count	067
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help

850-617-6381

3/11/2014 12:28:37 PM PAGE 1/001 Fax Server



March 11, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

C T CORPORATION SYSTEM

SUBJECT: LAST CALL OPERATING CO II., INC.

REF: W14000015603

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.

The Officer or Director signing this document must be listed in section #12A or #12B.

If you have any further questions concerning your document, please call (850) 245-6052.

Maryanne Dickey Regulatory Specialist II New Filing Section FAX Aud. #: H14000058211 Letter Number: 314A00005266

RE-SUBMIT
Placese refair original filing
date of submission 3/10

COVER LETTER

TO:	New Filing Sec Division of Co			
CLIB		•		
SOR.	JECT: Last Call	Operating Co II., Inc. Name of corpo	ration - must include suffix	
Dear :	Sir or Madam:			
"Cert	ificate of Existent	tion by Foreign Corporation; e," or "Certificate of Goo on corporation to transact	on for Authorization to Transa d Standing" and check are sul business in Florida.	act Business in Florida," brnitted to register the
Please	e return all corres	pondence concerning this	matter to the following:	
		Na	me of Person	
		Firm	n/Company	
			Address	
		City/S	State and Zip code	
lcostn	er@fhrg.com	F-mail address: (to be	used for future annual report	notification)
For fi	urther information	concerning this matter, pi	-	ionion,
		at ()	
	Name of Perso	n	Area Code & Daytime Telepl	none Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclo	sed is a check for	the following amount:		
□ \$7	0.00 Filing Fee	S78.75 Filing Fee & Certificate of Status		S87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. J. Last Call Operating Co II., Inc. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) (FEI number, if applicable) (State or country under the law of which it is incorporated) 4. 02/19/2014 5. Perpetual (Duration: Year corp. will cease to exist or "perpetual") (Date of incorporation) Upon Qualification (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7, 1551 N. Waterfront Parkway, Suite 310, Wichita, KS 67206 (Principal office address) same (Current mailing address) 8. Restaurant and Bar (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) 9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) C T Corporation System Name: 1200 South Pine Island Road Office Address: **Plantation** Florida 33324 10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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. Kristin Bolden Assistant Secretary

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

(Registered agent's signature)

12. Names and business addresses of officers and/or directors:	三菜 善 :
A. DIRECTORS SEE ATTACHMENT	一数 5 个
	THE REAL PROPERTY.
Chairman:	50 S
Address:	SECTION SECTION
Vice Chairman:	<u>,</u> a'
Address:	
Director;	
Address:	· · · · · · · · · · · · · · · · · · ·
·	
Director:	
Address:	
B. OFFICERS	
President:	
Address:	
Vice President: JAMES K. ZIELKE	
Address: 1551 N. Waterfront Parkway, Suite 310	
Wichita, KS 67206	<u> </u>
Secretary: JAMES K. ZIELKE	
Address: 1551 N. Waterfront Parkway, Suite 310, Wichita, KS 67206	
Treasurer: JAMES K. ZIELKE	
Address: 1551 N. Waterfront Parkway, Suite 310, Wichita, KS 67206	
NOTE: If necessary, you may attach an addendum to the application listing additional officers and	or directors.
Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the are true and that he or she is aware that false information submitted in a document to the Department a third degree felony as provided for in s.817.155, F.S.	e facts stated herein t of State constitutes
14. James K. Zielke	
(Typed or printed name and capacity of person signing application)	

Attachment to Florida Officers & Directors

1 Full Name:

Officer/Director:

Officer's Title:

Director's Title:

Business Address:

City: State:

ZIP Code:

JAMES K. ZIELKE

Officer, Director

SECRETARY, VICE-PRESIDENT,

TREASURER

Director

1551 N. Waterfront Parkway, Suite 310

Wichita

KS

67206

Delaware

PAGE I

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DBLAWARE, DO HERBY CERTIFY "LAST CALL OPERATING CO II., INC."

IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND
IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR
AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TENTH DAY OF
MARCH, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LAST CALL OPERATING CO II., INC." WAS INCORPORATED ON THE NINETEENTH DAY OF FEBRUARY, A.D. 2014.

5484905 8300

140307641

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

Joffrey W. Bullock, Secretary of State

OTHENTICATION: 1192021

DATE: 03-10-14