Page 1 of 1 Division of Corporations

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To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Maria Velez Account Name : PLAN

: PLANET HOLLYWOOD INTERNATIONAL, INC.

Account Number : I20080000100

: (407)903-5513

Please fax confirmation

: (407)352-7310 ₹Fax Number

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

Enail Address: Mvelez@earlenter prise. Com

FLORIDA LIMITED LIABILITY CO.

Chicken Guy (Bloomington), LLC

Certificate of Status	0
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Page Count	03
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Help

Company is:

H190002185983

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I Name

The name of this Limited Liability Company is:

37

CHICKEN GUY (BLOOMINGTON), LLC

ARTICLE II Address

The mailing address and the street address of the principal office of this Limited Liability

4700 Millenia Blvd., Ste 400 Orlando, FL 32839

ARTICLE III Management

This Limited Liability Company is to be managed by one or more managers and is, therefore, a "manager-managed" limited liability company.

ARTICLE IV

Registered Agent, Registered Office & Registered Agent's Signature

The name and the Florida street address of the Registered Agent of this Limited Liability Company is:

> Michael E. Neukamm Grav Robinson, P.A. 301 E. Pine Street, Suite 1400 Orlando, FL 32801

Having been named as registered agent to accept service of process for this limited liability company at the place so designated in these Articles of Organization, the undersigned hereby accepts this appointment and agrees to act in this capacity. The undersigned agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties and is familiar with and accepts the obligations of the undersigned's position as registered agent, as provided for in Chapter 505, Florida Statutes.

REGISTERED AGENT'S SIGNATURE

H190002185983

In accordance with Section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided in Section 817.155. Florida Statutes.

AUTHORIZED REPRESENTATIVE'S SIGNATURE

Thomas Avallone

Type or printed name of signee

FILING FEES:
\$100.00 Filing Fee for Articles of Organization
\$25.00 Designation of Registered Agent
\$30.00 Certified Copy (OPTIONAL)
\$5.00 Certificate of Status (OPTIONAL)