

PLEASE READ ALL INSTRUCTIONS BEFORE

LIMITED LIABILITY  
COMPANY  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Nov 15 1999 8:00 am  
Secretary of State

DOCUMENT # 198000002485

1. Limited Liability Company's Name

Roadhouse Grill Property, LLC

2. Principal Office Address

2703-A Gateway Drive

Suite, Apt. #, etc.

City & State

Pompano Beach, FL

Zip

33069

Country

3. Mailing Office Address

2703-A Gateway Drive

Suite, Apt. #, etc.

City & State

Pompano Beach, FL

Zip

33069

Country

4. State/Country of Formation

Florida

5. Date Organized or Qualified  
To Do Business in Florida

October 29 1998

6. FEI Number

65-0873938

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☒

\$5.00 Additional Fee required  
for a Certificate of Status

8. Name and Address of Current Registered Agent

Name

Martin J. Bernholz

Street Address (P.O. Box Number is Not Acceptable)

2703-A Gateway Drive

Suite, Apt. #, Etc.

City

Pompano Beach

State

FL

Zip Code

33069

MJH

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of  
Registered Agent

*[Signature]*

REGISTERED AGENT MUST SIGN

Date 11-05-99

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MEM	Ayman Sabi Roadhouse Grill, Inc.	2703-A Gateway Drive	Pompano Beach, FL 33069
			200003051992--8
			-11/22/99--01139--018
			*****155.00 *****155.00
	REINSTATEMENT 1999		

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of  
Managing Member/Manager

*[Signature]*

Date 11/2/99

Daytime Phone # (954) 957-2600

Typed or printed name of signing Managing Member/Manager

Ayman Sabi, President & CEO

CR2041 (9/99)