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Holland & Knight LLP Requester's Name		
315 So. Calhoun Street Address		
425-5675		
City/State/Zip Phone	#	
	Office Use Only UMENT NUMBER(S), (if known):	
CORPORATION NAME(S) & DOC	UMENT NUMBER(S), (if known):	جدا
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Walk in Pick up time	Certified Copy	
☐ Mail out ☐ Will wait	Photocopy Certificate of Status	
NEW FILINGS	AMENDMENTS	_
☐ Profit	Amendment	
Not for Profit	Periometrian of P. A. Officer/Director	
Limited Liability	Change of Registered Agent	
Domestication	Dissolution/Withdrawal	
Other	☐ Merger	
OTHER FILINGS	Change of Registered Agent Dissolution/Withdrawal Merger REGISTRATION/QUALIFICATION Foreign Limited Partnership Reinstatement Trademark	
Annual Report	☐ Foreign	
☐ Fictitious Name	Limited Partnership	
	Reinstatement & Q	
	Trademark	
	Other	
	(J. p. d)	7

Examiner's Initials

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

. <u>Tallaha</u>	issee Bevera	ge Co. LLC (Name of for	eign lin	nited liability co	mnany)		
		(11000000000000000000000000000000000000					
<u>Minneso</u> (Iurisdiction un	ta der the law of whi	ch foreign limited liab	3.	<u></u>	FEI number if an	r_ plicable)	-
(variotionon as	company is org			•	TETHUMOO, IT ap	photoicy	
. Novembe	er 16, 2001		5	Perpetual	1		
	(Date of Organizat	tion)		(Duration: Y	ear limited liability	company will cease	to
					exist or "perpetu	ai")	
. <u>Decemb</u> e	er 1, 2001			.,			
	(Date first transac	cted business in Florida	ı. (See s	ections 608.501	, 608.502, and 817	.155, F.S.)	
. <u>1405 X</u> e	nium Lane, J	Plymouth, MN 55	5441			_	
		(Street or	idress o	f principal offic	9)		
		(Succi at	лисээ О	r bimorbai oine	~,		
. If limited lia	ability company	is a manager-man	aged c	ompany, chec	ck here 🗌	-	
						74 Cr	<u> </u>
. The name a	nd usual busine	ess addresses of the	mana	ging member	s or managers ar	re as follows:	<u></u>
_ Jay Wit	:ze1	1405 Xenium 1	ane.	Plymouth.	MN 55441	## ## ## ## ## ## ## ## ## ## ## ## ##	
		**************************************		<u> </u>	1111 20 1111		- 8
Lowell	Lankford	1405 Xenium 1	Lane,	Plymouth,	MN 55441	Ho.	= {
70 - 1 1 1		1/05 m /	-	T) . 1	NOT 55//1		**
Ralph W	I. Beha	1405 Xenium 1	ane,	Plymouth,	MN 55441	<u> </u>	
Steven	A. Mogck	1405 Xenium I	Lane,	Plymouth,	MN 55441	Ď.	30
•							
0. Attached is an	ı original certificate	of existence, no more t	han 90 d	lays old, duly aut	henticated by the of	ficial having custody	of records
		which it is organized. (A			otable. If the certific	ate is in a foreign lang	guage, a
translation of	the certificate under	roath of the translatorn	oust be s	ubmitted.)			
1 Notara of I	haim.aaa aa m		سم اسمه		71	14	
1. Nature of t	ousmess or purp	poses to be conduc	ted or	promoted in i	нопа: <u>нота</u>	Liquor	
license	e for new Rad	disson Hotel	A				
		14 6/1	//				 -
	<u></u> Z	In 100g	<u> </u>				
	Signatu	re of a member or	an aut	horized repres	sentative of a m	ember.	
		ance with section 608.40 ation under the penalties				ututes	
		en A. Mogck, As	- •	-			

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Con	mpany is:					
Tallahassee Beverage Co. LLC						
2. The name and the Florida street addre	ss of the registere	ed agent and office are:				
Corpo	oration Service	Company				
(Name)						
	1201 Hays Stree		DEC I			
Florida street address (P.O. Box NOT ACCEPTABLE)						
Tallahassee	FL.	32301				
	(City/State/Zip)		-			
	(==-0, = -=-e, ==-p)		1: 43 ORIDA			

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Brian Courtney
as its agent
(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

state of Minnesota

SECRETARY OF STATE

Certificate of Good Standing

I, Mary Kiffmeyer, Secretary of State of Minnesota, do certify that: The limited liability company listed below is a limited liability company formed or registered to do business under the laws of Minnesota; the limited liability company was formed by the filing of articles of organization or registered to do business by filing an application for a certificate of authority with the Office of the Secretary of State on the date listed below; the limited liability company is governed by Chapter 322B of Minnesota Statutes; and this limited liability company is authorized to do business as a limited liability company at the time this certificate is issued.

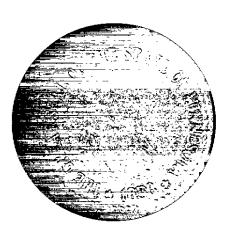
Name: Tallahassee Beverage Co. LLC

Date Formed or Registered: November 16, 2001

State of Organization: Minnesota

This certificate has been issued on December

DEC 18 SHII: 43
RETARY OF STATE
AHASSEE, FLORIDA



Mary Kiffneyer Secretary of State.