M 05000002431

(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Requestor's Name)
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	,
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	/City/State/Zin/Dhone #A
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	(City/State/Zip/Priorite #)
(Document Number) Certified Copies Certificates of Status	PICK-UP WAIT MAIL
(Document Number) Certified Copies Certificates of Status	
Certified Copies Certificates of Status	(Business Entity Name)
Certified Copies Certificates of Status	
Certified Copies Certificates of Status	(Document Number)
	,
	Cartified Conies Cartification of Status
Special Instructions to Filing Officer:	Certified copies Certificates of Statos
Special Instructions to Filing Officer:	
	Special Instructions to Filing Officer:
L.	
torco	Forle

Office Use Only



900048781709

05/03/05--01017--013 **125.0n

65 left -Z. Fal Fe3

TRANSMITTAL LETTER

Division of Corporations		
SUBJECT: Gainesville Sonic #1, LLC		
(Name of Limited Liability	Company)	
The enclosed "Application by Foreign Limited Liability Compared Florida," Certificate of Existence, and check are submitted to repliability company to transact business in Florida		
Please return all correspondence concerning this matter to the fo	llowing:	
Jay Bequette		
(Name of Person)	·	
	2 S	
Bequette & Billingsley, P.A.		
(Firm/Company)	2	
(Turn Company)	ŗ,	
425 West Capitol Avenue, Suite 3200		
(Address)	<u>કેટ</u> છે દુરા છે	
	A	
Little Rock, Arkansas 72201		
(City/State and Zip C	ode)	
For further information concerning this matter, please call:		
Jay Bequette at (501	374-1107	
(Name of Person) (Area Co	ode & Daytime Telephone Number)	
STREET ADDRESS: MA	ILING ADDRESS:	
	ristration Section	
<u> </u>	Division of Corporations	
	P.O. Box 6327	
	Tallahassee, Florida 32314	
Enclosed is a check for the following amount:		
	Filing Fee & \$\Bigcup \$160.00 Filing Fee, Certificate Certified Copy of Status & Certified Copy	

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 FOREXCH LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name of Foreign Limited	Liability Company)		
Arkansas Jurisdiction under the law of which foreign limited liability	3. (FEI number, if applicable)		
company is organized) April 6, 2005	5 January 31, 2005		
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")		
(Date first transacted business in F (See sections 608.501 & 608.502 F.		 -	
1910 North Main Street			
Gainesville, FL 32609	T <u>A</u>	0,	
(Street Addres	s of Principal Office)		
If limited liability company is a manager-manage	d company, check here 🔽	1-2	
The name and usual business addresses of the ma	naging members or managers are as follows:	===	
Dennis Porter	©;:		
263 Lakeview Road	RIDA	చ	
Edgemont, AR 72044			
). Attached is an original certificate of existence, no more than 9 e jurisdiction under the law of which it is organized. (A photox instation of the certificate under oath of the translator must be sure. 1. Nature of business or purposes to be conducted restaurants and to engage in any other activities reason.	opy is not acceptable. If the certificate is in a foreign lang bmitted.) or promoted in Florida: to own and operate		
		-	
(In accordance with section 608.408(3),	authorized representative of a member. F.S., the execution of this document constitutes erjury that the facts stated herein are true.)		
Dennis Porter			
Typed or printe			

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 nam	ne of the Limited Liability	Company is:	
Gainesville	Sonic, LLC		
2. The nan	ne and the Florida street ad	ldress of the registered agent and office are:	
	Chad Jarvis		
		(Name)	
	6025 SW 250th Street		
	Florida Str	eet Address (P.O. Box NOT ACCEPTABLE)	1 -2
	Newberry	FI 32669	2 P
		City/State/Zip	
liability con agent and a relating to	npany at the place designate igree to act in this capacity. the proper and complete per	nt and to accept service of process for the abouted in this certificate, I hereby accept the appoint I further agree to comply with the provision of the formance of my duties, and I am familiar with a dagent as provided for in Chapter 608, Floridation.	ointment as registered is of all statutes th and accept the

\$ 100.00 Filing Fee for Application

\$ 25.00

\$ 30.00

Designation of Registered Agent

Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Arkansas Secretary of State Charlie Daniels

State Capitol Building + Little Rock, Arkansas 72201-1094 + 501.682.3409

CERTIFICATE OF GOOD STANDING

I, Charlie Daniels, Secretary of State of the State of Arkansas, and as such, keeper of the records of domestic and foreign corporations, do hereby certify that the records of this office show

GAINESVILLE SONIC #1, LLC

authorized to transact business in the State of Arkansas as a Limited Liability Company, filed Articles of Organization in this office April 06, 2005.

Our records reflect that said entity, having complied with all statutory requirements in the State of Arkansas, is qualified to transact business in this State.

In Testimony Whereof, I have hereunto set my hand and affixed my official Seal. Done at my office in the City of Little Rock, this 29th day of April 2005.

Charlie Daniels

Secretary of State

J BUTLER