M10000006354

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RE-SUBMIT
Please retain original filing date of submission 4/8/09

LIMITED LIABILITY REINSTATEMENT

FIRE MOUNTAIN RESTAURANTS, LLC

Certificate of Status	0
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S. HAWKES
APR 10 2009
EXAMINER

April 9, 2009

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CT CORPORATION SYSTEM

SUBJECT: FIRE MOUNTAIN RESTAURANTS, LLC
REF: W09000016583

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Suzanne Hawkes
Regulatory Specialist II
Registration/Qualification Section

FAX Aud. #: H09000082729
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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

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TALLAHASSEE, FLORIDA

CR2E041 (10/08)

DOCUMENT # M06000006354

1. Limited Liability Company's Name
FIRE MOUNTAIN RESTAURANTS, LLC

2. Principal Office Address - No P.O. Box #
1460 BUFFET WAY
Suite, Apt. #, etc.
City & State: EAGAN, MN
Zip: 55121 Country: USA

3. Mailing Office Address
1460 BUFFET WAY
Suite, Apt. #, etc.
City & State: EAGAN, MN
Zip: 55121 Country: USA

4. State/Country of Formation
DELAWARE

5. Date Organized or Qualified To Do Business in Florida: NOVEMBER 16, 2006

6. FEI Number: 57-098003 ☐ 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: CT CORPORATION SYSTEM
Street Address (P.O. Box Number is Not Acceptable): 1200 SOUTH PINE ISLAND ROAD
Suite, Apt. #, Etc.
City: PLANTATION State: FL Zip Code: 33324

☐ A $100 reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the $100 reinstatement be waived.

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] Marc G. Pierre, Asst Sec & V.P. Date 04/02/09
REGISTERED AGENT MUST SIGN

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
CEO	R MICHAEL ANDREWS	1460 BUFFET WAY	EAGAN, MN 55121
CFO	A KEITH WALL	1460 BUFFET WAY	EAGAN, MN 55121
SEC	H THOMAS MITCHELL	1460 BUFFET WAY	EAGAN, MN 55121
MGR	PAUL HOLOVNIA	1460 BUFFET WAY	EAGAN, MN 55121

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 3-27-09 Daytime Phone # 651-994-8608

Typed or printed name of signing Managing Member/Manager: PAUL HOLOVNIA, ASSISTANT SECRETARY

Fire Mountain Restaurants, LLC by Ryan's Restaurant Group, Inc. its' Sole manager.

FL118 - 10/06/2008 C T System Online

S. HAWKES
APR 10 2009
EXAMINER