

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H08000263243 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Division of Corporations

Fax Number : (850)617-6383

From

Account Name : C T CORPORATION SYSTEM

Account Number : FCA00000023 Phone

: (850)222-1092

Fax Number

: (850)878-5926

ELORIDA/FOREIGN LIMITED LIABILITY CO.

Aramark Schools Facilities, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

C. LEWIS NOV 262008

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

FILED 2009 NOV 25 AM 9: 10

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE	E STATE OF FLORIDA
1. ARAMARK Schools Facilities, LLC	
(Name of Foreign Limited Liability Company; must incl	ude "Limited Liability Company," "L.L.C.," or "LLC.")
consent of the managers or managing members adopting the alt Company," "L.L.C.," "LLC.")	ose of transacting business in Florida and attach a copy of the writter emate name. The alternate name must include "Limited Liability
2. Delaware	3. 26-3674561
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4. 11/5/08	5. Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6	
(Date first transacted business in Fi (See sections 608.501 & 608.502 F.S	lorida, if prior to registration.) i. to determine penalty liability)
7. 1101 Market Street, Phila, PA 19107	
(Street Address	of Principal Office)
8. If limited liability company is a manager-managed	i company, check here
9. The name and usual business addresses of the mar	agino members or managers are as follows:
ARAMARK Corporation, 1101 Market Street, Philadelphia	•
The state of the s	1444 12441
	•
10. Attended in the minimal antificate of substance we would be 00.	de and 4.1
the jurisdiction under the law of which it is organized. (A photocopy	days old, duly authenticated by the official having custody of records in by is not acceptable. If the certificate is in a foreign language, a
translation of the certificate under each of the translator must be sub-	mitted.)
11. Nature of business or purposes to be conducted o	r promoted in Florida:
Facility services (cleaning, maintenance, etc.) to pre-college	educational institutions
Messe	1
Signature of a member or an au	uthorized representative of a member.
(In accordance with section 608,608(3), F an affirmation under the penalties of per	2.S., the execution of this document constitutes
Alexander P. Marino, Authorized Per	
Typed or printed	d name of signee

FILED

2000 NOV 25 AM 9: 10

SELNETARY OF STATE
TALLAHASSEE, FLORIDA

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 POLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

If name unavailable, the alternate name to be used in the state of Florida is:				
2. The name and the Florid	a street address o	of the registered a	gent and office are:	
	ст	Corporation System		
		(Name)		
	1200 5	South Pine Island Ros	d	
	Florida Street Add	ress (P.O. Box <u>NOT</u>	ACCEPTABLE)	
	Plantation	IT.	33324	
	7	City/State/Zip		

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, Florida Statutes.

C T Corporation System
VickiAnn Owens
Special Assistant Secretary

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

Delaware

PAGE :

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ARAMARK SCHOOLS FACILITIES, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIRST DAY OF NOVEMBER, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

4619229 8300

081137404

You may verify this certificate online at corp.delaware.gov/authvez.shtml Harriet Smile Hindra

Harrist Smith Windsor, Secretary of State

AUTHENTICATION: 6982400

DATE: 11-21-08