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FLORIDA/FOREIGN LIMITED LIABILITY CO.

ARAMARK Business Facilities, LLC

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EXAMINER

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	ARAMARK Business Facilities, LLC (Name of Poreign Limited Liability Company; must inclu	ıde	s "Limited Liability Company," "L.L.C.," or "LLC.")	
COI	name unavailable, enter alternate name adopted for the purposessor of the managers or managing members adopting the alternatery," "L.L.C.," "L.L.C.")		of transacting business in Florida and attach a copy of the writt ate name. The alternate name must include "Limited Liability	er
	Platavanu		26-3674871	
	(Jurisdiction under the law of which foreign limited liability company is organized)	3.	(FEI number, if applicable)	
4	11/05/2008S	š.	Perpetual	
۳.	(Date of Organization)	•	(Duration; Year limited liability company will cease to exist or "perpetual")	
6.	N/A			
••	(Date first transacted business in Flo (See sections 608.501 & 608.502 F.S.	on to	da, if prior to registration.) determine penalty liability)	
7.	1101 Market Street, Philadelphia, PA, 19107			
	(Street Address If limited liability company is a manager-managed The name and usual business addresses of the mana ARAMARK Corporation, 1101 Market Street, Philadelphia,	c:	ing members or managers are as follows:	
the tran	instruction under the law of which it is organized. (A photocopy relation of the certificate under each of the translatur must be submitted. Nature of business or purposes to be conducted or To provide facility services (cleaning, maintenance, etc.) to discontinuous formation of a member or an aut (in accordance with section 608.408(3), F. an affirmation under the penalties of perjuit	yii rp he /sth	commerce, manufacturing or service industry. orized representative of a member, the execution of this document constitutes of that the facts stated herein are true.)	in
	Alexander P. Marino, Vice President,	A	RAMARK Corporation, Sole Member	

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 Liabi	lity Comp	any is:				
ARAMARK	BUS	INESS	PACI	LITIES,	HC	 _
If name unavailable, the alternate	name to b	e used in the	state of Flo	rida is:	·	
2. The name and the Florida stree	t address	of the regists	ered agent an	d office are:		_
	ст	Corporation S	ystem			
		(Name)				
	1200	South Pine Isla	nd Road			
F jo rida	Street Add	ress (P.O. Box	NOT ACCEPT.	ABLE)		
Plantati	oa	FL		33324		
		City/State/	Zip			
Having been named as registered a liability company at the place desig agent and agree to act in this capac relating to the proper and complete obligations of my position as registing CT Corporation Systems	nated in the city. I furth a performa ered agent	his certificate her agree to a nce of my du t as provided	, I hereby accomply with the ties, and I an	cept the appo the provisions familiar with er 608, Florid	intment as re of all statute h and accept	gistered 25
(Signature)	\$ 100.00 \$ 25.00 \$ 30.00 \$ 5.00	Designation Certified (for Applica on of Registe Copy (option of Status (o	ered Agent (al)		SSEE, FLORIUL

Delaware

PAGE 1

The First State

I, EARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ARAMARK BUSINESS FACILITIES, LLC"

IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND EAS 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 BEREBY FURTEER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

4619226 8300

081137582

You may verify this mertificate andia at corp. delaware.gov/authvor.whiml

Warriet Smith Windson, Secretary of State

AUTHENTICATION: 6982041

DATE: 11-21-08