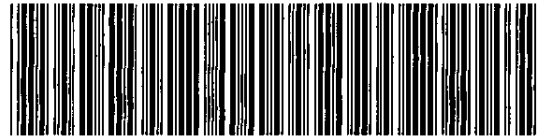


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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

THE **STOLAR**
PARTNERSHIP LLP

ATTORNEYS AT LAW

MARK A. BOMMARITO
(314) 641-5198
MBOMMARITO@STOLARLAW.COM

February 17, 2009

VIA FEDERAL EXPRESS

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**Re: Application by Foreign Limited Liability Company for Authorization to
Transact Business in Florida**

Dear Sir or Madam:

Enclosed please find the above-mentioned document along with the other necessary documents to do business in the State of Florida. Also enclosed is a firm check in the amount of \$160.00 for Filing Fees, Certificate of Status & Certified Copy. Please file the same as soon as possible.

If you have any questions regarding this matter, please contact me at (314) 641-5198. Thank you in advance for your kind consideration.

Regards,



Mark A. Bommarito
Legal Assistant

Mab

Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lakeland Wings, LLC
(Name of Limited Liability Company)

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Mark Bommarito
(Name of Person)

The Stolar Partnership
(Firm/Company)

911 Washington Ave., 7th Floor
(Address)

St. Louis, MO 63101
(City/State and Zip Code)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Mark Bommarito at (314) 231-2800
(Name of Person) (Area Code & Daytime Telephone Number)

MAILING ADDRESS:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

- \$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status \$155.00 Filing Fee & Certified Copy \$160.00 Filing Fee, Certificate 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 FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Lakeland Wings, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")

2. Missouri (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable)

4. January 28, 2009 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")

6. (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 150 Turner Boulevard St, Peters, MO 63376 (Street Address of Principal Office)

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8. If limited liability company is a manager-managed company, check here [X]

9. The name and usual business addresses of the managing members or managers are as follows: Steven Busch, 150 Turner Boulevard, St. Peters, MO 63376

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: Any lawful purpose within this state or any other jurisdiction, including, but not limited to, buying, selling, and generally investing in real estate.

[Signature] Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) Christopher M. Blanton 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 Company is:

Lakeland Wings, LLC

If name unavailable, the alternate name to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

CT Corporation System

(Name)

1200 South Pine Island Road

Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Plantation, FL 33324

FL

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.

(Signature)

*See attached
page*

Registered Agent
(optional)
(optional)

Re: LAKELAND WINGS, LLC

Having been named as registered agent and to accept service of process for **LAKELAND WINGS, LLC** at the place herein designated:

CT Corporation System
1200 South Pine Island Road
Plantation, Florida 33324

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 for in Chapter 608, F.S.

Dated: February 13, 2009

CT Corporation System

By: 

Jonathan L. Miles, Asst. Secretary

STATE OF MISSOURI



Robin Carnahan
Secretary of State

CORPORATION DIVISION
CERTIFICATE OF GOOD STANDING

I, ROBIN CARNAHAN, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

LAKELAND WINGS, LLC
LC0944007

was created under the laws of this State on the 28th day of January, 2009, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 16th day of February, 2009

Robin Carnahan

Secretary of State

