Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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Account Name : C T CORPORATION SYSTEM

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: (850)222-1092

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Foreign	Limited Liabi	lity Company
HOOTERS OF	JACKSONVII	LLE LANDING, LLO

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SECRETARY OF STATE

ILLAHASSEE, FLORID

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A. LUNT FEB 1 0 2010

EXAMINER

COVER LETTER

Division of Corpora					
SUBJECT: HOC	oters of Jac	KSONVILLE LO	inding, LC		
The enclosed "Application by Existence, and check are sub-	/ Foreign Limited Liability mitted to register the abov	y Company for Authorization e referenced foreign limited	n to Transact Business in Florida," C liability company to transact busines	entificate of ss in Florida	
Please return all corresponder	nce concerning this matter	to the following:		•	
		Shauna Mullings Fulton			
		Name of Person			
	Н	ooters of America, LLC	Pos	2011	
		Firm/Company	3 -₹6	I FEB	-7
		1815 The Exchange	ASS.	EB-9 AMI	-
		Address	Me	- i	r
		Atlanta, GA 30339		無意に	g Idei June
	C	lity/State and Zip Code		7	
	ŝ	nullings@hooters.com			
	E-mail address: (to b	e used for future annual repo	rt notification)		
For further information conce	rning this matter, please o	all;			
Shauna Mullings Fol		El (951-2040		
Na	me of Person	Area Code & Daytime Tele	ephone Number		
MAILING ADDRE	ions D	TREET ADDRESS: ivision of Corporations			
Registration Section P.O. Box 6327		egistration Section lifton Building			
Tallahassee, FL 3231	4 20	661 Executive Center Circle allahassee, FL 32301			
Enclosed is a check for the	ne following amount:				
S125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy	\$160.00 Fiting 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: acksonville (Name of Foreign Limited Liability Company; must include "Limited Liability (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, Georgia (Jurisdiction under the law of which foreign limited liabil company is organized) 1/24/2011 (Duration: Year limited liability company will cease to (Date of Organization) exist or "perpetual") б. (Date first transacted business in Florida, if prior to registration. (See sections 608.501 & 608.502 F.S. to determine penalty liability) 1815 The Exchange, Atlanta, GA 30339 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: N/A : 10. Attached is an original cartificate 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 manufaction of the certificate under path of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: Restaurant ownership and operation 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 penjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.) Obu Cr. brookS

Typed or printed name of signee

FILED

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:

C T Corporation System,

(Signature)

By:

If unavailab	le, the alternate to be used in t	the state of Florida is:	2011.1 SE& TALL
2. The nam	e and the Florida street addres	s of the registered agent and office are:	HL IARY
	C T Corporation System		
		(Name)	
	1200 South Pine Island Road		
	Florida Street A	ddress (P.O. Box <u>NOT</u> ACCEPTABLE)	
	Plantution	FL 33324	
		City/State/Zip	-
liability com agent and ag	pany at the place designated in tree to act in this capacity. I fut	d to accept service of process for the above so this certificate, I hereby accept the appointn orther agree to comply with the provisions of chance of my duties, and I am familiar with an	nent as registered all statutes

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

Control No. 11004639

STATE OF GEORGIA

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

HOOTERS OF JACKSONVILLE LANDING, LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 01/24/2011 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official scal of the City of Atlanta and the State of Georgia on 9th day of February, 2011

B: Ph

Brian P. Kemp Secretary of State

Certification Number: 6547424-1 Reference; Verify this certificate online at http://corp.sos.state.gu.us/corp/soskb/verify.asp