Division of Corporations 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.

(((H110000347183)))



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

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

: (850)222-1092

: (850)878-5368

Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email	Address:			 	 	

Foreign Limited Liability Company HOOTERS OF LAKELAND II, LLC

Certificate of Status	U
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

A. LUNT

FEB 10 2010

EXAMINER

COVER LETTER

Division of Corporations	
SUBJECT: Hooters of Lakeland 11, LLC	
Name of Limited Liability Company	
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Floric Existence, and check are submitted to register the above referenced foreign limited liability company to transact by	
Please return all correspondence concerning this matter to the following:	
Sheuna Mullings Fulton	
Name of Person	_
Hooters of America, LLC	
Firm/Company	
	7A. 3
1815 The Exchange	
Address	
Atlanta, GA 30339	Elary of
City/State and Zip Code	
smullings@hooters.com	
	ज्ञान क
For further information concerning this matter, please call:	, 4
Shauna Mullings Pulton at (770) 951-2040	
Name of Person Area Code & Daytime Telephone Number	_
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a check for the following amount: \$\int_{\text{S125.00}} \text{Filing Fee} \text{ \$\int_{\text{Certificate}} \text{ \$\int_{\text{Certificate}} \text{ \$\int_{\text{Certificate}} \text{ \$\int_{\text{Certified Copy}} \text{ \$\int_{\text{S155.00}} \text{Filing Fee & } \text{ \$\int_{\text{S160.00}} \text{Filing Fee, Certified Copy} }	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO 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: akeland (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, Georgia (Jurisdiction under the law of which foreign limited liabilit company is organized) 5. Perpetual 1/24/2011 (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") (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 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: 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 porjury 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 \$.817.155, F.S.) G. Brooks 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.

funavail		akeland 11, LLC	
. The na	me and the Florida street	address of the registered agent and office are:	
	C T Corporation System	n	SEB TALL
	<u></u>	(Name)	AHAS
	1200 South Pine Island	Road	
	Florida S	treet Address (P.O. Box NOT ACCEPTABLE)	FLOR
	Plantation	FL 33324	
		City/State/Zip	<u> </u>
iability co gent and elating to	ompany at the place design agree to act in this capaci the proper and complete p	ent and to accept service of process for the abouted in this certificate, I hereby accept the appoint. I further agree to comply with the provision performance of my duties, and I am familiar with the provided for in Chapter 608. Floridation systems	ointment as registe s of all statutes h and accept the
lability co igent and elating to	ompany at the place design agree to act in this capaci the proper and complete p is of my position as register C T Corporati By:	ated in this certificate, I hereby accept the appo ty. I further agree to comply with the provision performance of my duties, and I am familiar wit red agent as provided for in Chapter 608. Flori	ointment as registe s of all statutes h and accept the
iability co igent and elating to	ompany at the place design agree to act in this capaci the proper and complete p is of my position as register C T Corporati By:	ated in this certificate, I hereby accept the apports. I further agree to comply with the provision performance of my duties, and I am familiar with the dependent as provided for in Chapter 608. Floridation System. (Signature)	ointment as registe s of all statutes h and accept the

\$ 5.00 Certificate of Status (optional)

Control No. 11004746

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 LAKELAND II, 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 seal of the City of Atlanta and the State of Georgia on 4th day of February, 2011

Bilh

Brian P. Kemp Secretary of State

Certification Number: 6499848-1 Reference: Verify this certificate online at http://corp.sos.state.ga.us/curp/soskb/verify.asp