Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GARY, DYTRYCH & RYAN, P.A.

Account Number : I19990000255 Phone : (561)844-3700 Fax Number : (561)844-2388

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BURGERFI INTERNATIONAL, LLC

Certificate of Status	0
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B. BOSTICK

OCT 1 0 2012

EXAMINER

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COVER LETTER

TO:	CO: Registration Section Division of Corporations				
SUBJ	ECT:	BURGERFI I	NTERNATIONAL, I	_LC	
	· · · · · · · · · · · · · · · · · · ·	Name of Foreign	Limited Liability Compa	any	
Dear S	Sir or Madam:				
		vit by Foreign Limits) and fee(s) are subr	ed Liability Company to nitted for filling.	Change Manager(s)	or
Please	e return all cori	respondence concern	ing this matter to the foll	owing:	
	LA'	WRENCE W. SMIT	'Н		
		Name of Person			
	GARY,	DYTRYCH & RYAI	N, P.A.		
		Firm/Company			
	701 U.Ş. H	HIGHWAY ONE, S	UITE 402	•	
		Address			
	NORTH	PALM BEACH, FL	33408		
		City/State and Zip Co			
		MD@GDR-LAW.0	COM		
<u>I</u>	E-mail address	(to be used for futur	re annual report notificati	on)	
For fu	ırther informat	ion concerning this r	natter, please call:		
				844-3700	
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		URIER ADDRESS:	MAILING A		e .
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	Clifton Buildi		P.O. Box 6323		
	2661 Executive Tallahassee, I	ve Center Circle Florida 32301	Tallahassee, F	lorida 32314	, o
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	osed is a check Filing Fee	s for the following a \$30 Filing Fee & Certificate of Status	mount: \$\int \\$55.00 \text{ Filing Fee & Certified Copy}\$	\$60 Filing Fee, Certificate of Status Certifled Copy	. '
CR2E	123(8/07)				

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AFFIDAVIT BY FOREIGN LIMITED LIABILITY COMPANY TO CHANGE MANAGER(S) OR MANAGING MEMBER(S)

The name of the limited liability compant Department of State is: BURG	y as it appears on the records of the Florida ERFI INTERNATIONAL, LLC				
2. This entity was formed under the laws of	entity was formed under the laws of: DELAWARE				
3. This entity was authorized to transact but and its Florida document/registration number					
4. The name and address of each manager of	or managing member is as follows:				
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:				
MGRM	JOHN ROSATTI 105 U.S. HIGHWAY ONE NORTH PALM BEACH, FL 33408				
•					
	·				
Required Signature: Signature of Manager,	Managing Member or Member				

Filing Fee: \$25