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Division of Corporations

Fax Number : (850)617-6383

. Account Name

; C T CORPORATION SYSTEM

Account Number : PCA000000023, Phone

: (850)222-1092

Fax Number

: (850)878-5368

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

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Foreign Limited Liability Company Friendly's Manufacturing and Retail, LLC

| Certificate of Status | 0 |
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| Certified Copy | 0 |
| Page Count | w5 |
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TRANSMISSION VERIFICATION REPORT

03/05/2012 09:25 CT CORP 6022774792 6022774792 BROL9J995764

DATE, TIME FAX NO. /NAME

03/05 09:24 818506176386 00:00:46 04 OK

Division of Corporations

Page 1 of 1

Florida Department of State

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: C T CORPORATION SYSTEM Account Name

Account Number : PCA000000023 : (850)222-1092 Phone Fex Number : (850)878-5368

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

Email Address:

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

IN COMPLIANCE WITH SECTION GOSSOS, PLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREKIN IMATED CARBITTY COMPANY TO TRANSACT RESINESS IN THE STATE OF FLORIDA:

| | Friendly's Manufacturing and Retail, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") | | | | | | | | |
|------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|--|--|--|
| 001 | name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written ascent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability appany," "L.L.C." "LLC.") | | | | | | | | |
| ī | Dolaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) | | | | | | | | |
| 4. | January 3, 2012 (Date of Organization) 5 Perpetual (Duration: Year limited liability company will cease to exist or "perpetual") | | | | | | | | |
| 6. 7. | Upon qualification (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 1855 Boston Road, Wilbraham, MA 01095 | | | | | | | | |
| | (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: Friendly's Ice Cream, LLC, 1855 Boston Road, Wilbraham, MA 01095 | | | | | | | | |
| fre tra | Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in a jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a relation of the certificate under oath of the translator must be submitted.) Nature of business or purposes to be conducted or promoted in Florida: | | | | | | | | |
| | Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of the document constitutes an allimation under the penalties of perjury that the facts stood heroin are true. I am aware that any felse information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.) Robert K. Sawyer, Jr., Authorized Representative of Pricudly's lee Cresm, LLC, Member Typed or printed name of signee | | | | | | | | |

FL037 - 10/03/2010 () T System Online

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: | | | |
|------------------------------------------------|---------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|-----------------------------------------|
| Priendly's Man | ufacturing and Retail, LLC | | | | • |
| If unavailable | e, the alternate to be use | d in the state of Flori | da is: | | |
| 2. The name | and the Florida street ac | ddress of the register | ed agent and office are: | | |
| | C'I Corporation System | | | | |
| | <u> </u> | (Name) | | Bu - | - |
| | 1200 South Pine Island R | ond | | > 2 | X T |
| | Florida Str | eet Address (P.O. Box] | NOT ACCEPTABLE) | | l. 🗔 |
| | Plantation | Fl. ³ | 3324 | <u>m</u> -< | क । इ. नि |
| | | City/State/Z | ip | | ֓֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֓֓֓֡֓֓֓֡֓ |
| liability compagent and agr relating to the | any at the place designat ree to act in this capacity. r proper and complete pe | ted in this certificate, . I further agree to co rformance of my dutie d agent as provided fi | ve of process for the above state I hereby accept the appointment amply with the provisions of all es, and I am familiar with and a for in Chapter 608, Florida Statu Sharon R. Kresz | u inages Las registeres statules scoept the | |
| | Miller | (Signature) | Assistant Secretary | | |
| | | | or Application of Registered Agent | | |

\$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)

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Delaware

PAGE :

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "FRIENDLY'S MANUFACTURING AND
RETAIL, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF
DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO
FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIFTH DAY OF
MARCH, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5089571 8300

120275839

Jeffrey W. Builtock, Secretary of State
AUTHENTY CATION: 9408757

DATE: 03-05-12