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J. BRYAN

OCT -9 2012

**EXAMINER** 

## **COVER LETTER**

TO:	Registration Section Division of Corporations	
SUBJE		Name of Limited Liability Company
		realite of Entitled Entothly Company
		Liability Company for Authorization to Transact Business in Florida," Certificate of e above referenced foreign limited liability company to transact business in Florida
Please	return all correspondence concerning this	matter to the following:
	Dean D. Willer	
		Name of Person
	Winthrop & Weinstir	ne, PA
		Firm/Company
	225 S. 6th Street,	Suite 3500
		Address
	Minneapolis, MN 5	Firm/Company Suite 3500 Address  5402 City/State and Zip Code
		City/State and Zip Code
ı	dwiller@winthrop	com
	E-mail address	s: (to be used for future annual report notification)
For furt	her information concerning this matter, p	lease call:
	Dean D. Willer	at (612 ) 604-6633
	Name of Person	Area Code & Daytime Telephone Number
	MAILING ADDRESS: Division of Corporations	STREET ADDRESS: Division of Corporations
	Registration Section P.O. Box 6327	Registration Section Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301
	sed is a check for the following am \$125.00 Filing Fee \$130.00 Filing Certificate of \$1.00	Fee & \$\int\\$155.00 Filing Fee & \$\int\\$160.00 Filing Fee, Certificate

### 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:

(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 wriconsent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")
2. Minnesota 3.
2. IVITINESOTA  (Jurisdiction under the law of which foreign limited liability company is organized)  (FEI number, if applicable)
<sub>4.</sub> July 24, 2012 <sub>5.</sub> Perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
<sub>6.</sub> July 24, 2012
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 211 North First Street 55 乌
Minneapolis, MN 55401
(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:
Richard D'Amico, Larry D'Amico, Paul Smith and Gerard L. Cafesjian
211 N. First St., Minneapolis, MN 55401
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of record 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 eath of the translator must be submitted.)
,
11. Nature of business or purposes to be conducted or promoted in Florida: Restaurant
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. 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.)

Dean D. Willer, Authorized Representative

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:	
Masa Naples, LLC	-
If unavailable, the alternate to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are:	1007 -8 1007 -8
Richard D'Amico	2 6
(Name)	1:28
9123 Strada Place, Suite 7135  Florida Street Address (P.O. Box NOT ACCEPTABLE)	- 0
Fiorida Street Address (F.O. Box NOT ACCEPTABLE)	
Naples <sub>FL</sub> 34108	
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)

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

# Office of the Minnesota Secretary of State Certificate of Good Standing

I, Mark Ritchie, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name:

Masa Naples, LLC

Date Filed:

07/24/2012

File Number:

499437700021

Minnesota Statutes, Chapter:

322B

Home Jurisdiction:

Minnesota

This certificate has been issued on:

10/02/2012

OF THE ST

Mark Ritchie
Mark Ritchie

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Secretary of State State of Minnesota