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(Requestor's Name)	-		
(Address)	-		
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(City/State/Zip/Phone #)	-		
PICK-UP WAIT MAIL			
(Business Entity Name)	-		
(Document Number)			
Certified Copies Certificates of Status	_		
Special Instructions to Filing Officer:	1		
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EXAMINER

COVER LETTER

Division of Corporations
SUBJECT: PBPDQ Propco Wellington, LLC
Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this matter to the following:
Sheryl Fisher
Name of Person
Palm Beach Restaurant Partners LLC
Firm/Company
777 South Flagler Drive, Suite 1801
Address
West Palm Beach, FL 33401
City/State and Zip Code
sherylf@pdqpb.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Shervl Fisher #7 561 \ 623-1241

 MAILING ADDRESS:
 STREET

 Division of Corporations
 Division of Divisi

Name of Person

Registration Section P.O. Box 6327

Tallahassee, FL 32314

TO:

Registration Section

STREET ADDRESS:

Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle

Area Code & Daytime Telephone Number

Tallahassee, FL 32301

Enclosed is a check for the following amount:

\$125.00 Filing Fee \$\times \text{Certificate of Status}

\$155.00 Filing Fee & Certified Copy

\$160.00 Filing 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:

PBPDQ Propco Wellington, LLC	
(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 consent of the managers or managing members adopting the alternate name. The alternate name must incompany," "L.L.C," "LLC.")	
2. Delaware 3. 99-0382483	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applic company is organized)	cable)
4. November 8, 2012 5. Perpetual	
(Date of Organization) (Duration: Year limited liability con exist or "perpetual")	mpany will cease to
6. N/A	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7. 777 South Flagler Drive, Suite 1801	
West Palm Beach, FL 33401	
(Street Address of Principal Office)	SE SE
3. If limited liability company is a manager-managed company, check here	FIL 12 NOV 25 SECREASE VALLAHASS
9. The name and usual business addresses of the managing members or managers are a	is follows:
John T Gannon - 777 South Flagler Dr, Ste 1801, West Palm Beach, FL	33401 = 5
	0RIB
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official	having a stocky of records in
the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a	
ranslation of the certificate under oath of the translator must be submitted.)	
11. Nature of business or purposes to be conducted or promoted in Florida: Restaura	ant
John J. Son man	<u> </u>
Signature of a member or an authorized representative of a mem	ber.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation of the contract of the	ation under the

Typed or printed name of signee

John T Gannon

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.)

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:	
PBPDQ Propco Wellingto	n, LLC	
If unavailable, the alternate to be used	in the state of Florida is:	
2. The name and the Florida street add	dress of the registered agent and office are:	
CT Corporation	A	72
	(Name)	
1200 South Pine i		FILED 12 NOV 29 PM
Florida Stree	et Address (P.O. Box NOT ACCEPTABLE)	H 1: 2
Plantation,	_{FL} 33324	24 24
	City/State/Zip	
liability company at the place designated agent and agree to act in this capacity. I relating to the proper and complete perfe	and to accept service of process for the above state d in this certificate, I hereby accept the appointment I further agree to comply with the provisions of all formance of my duties, and I am familiar with and cagent as provided for in Chapter 608, Florida State	nt as registered statutes accept the utes.
Madra	(Signature) Madonna Cud	•
	(Signature) Special Assistant	oci cai y
\$ 100	0.00 Filing Fee for Application 5.00 Designation of Registered Agent	
	0.00 Certified Copy (optional)	
\$ 5	5.00 Certificate of Status (optional)	



PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "PBPDQ PROPCO WELLINGTON, 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 TWENTIETH DAY OF NOVEMBER, A.D.

2012.

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

FILED
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SEGRETARISSEELE LORRIDA

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121248573

AUTHENTICATION: 0002747

DATE: 11-20-12

You may verify this certificate online at corp.delaware.gov/authver.shtml