M1300000776

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

Office Use Only



500243737275

2019 FEB -5 PM 12: 35
SECRETARY OF STATE
AND AHASSEE FLORIDA

DEPARTMENT OF STATE

FEB 0 6 2012 D. BRUCE



ON SERVICE COMPANY						
ACCOUNT NO.	:	120000	0000195			
REFERENCE	:	521355	4800344			
AUTHORIZATION	:					
COST LIMIT	:	\$ 125	Spellole	man	مر	
ORDER DATE: February 5, 2013 ORDER TIME: 9:52 AM ORDER NO: 521355-005 CUSTOMER NO: 4800344						-
FOREIGN F	LLI:	NGS		. 		
NAME: BEEFS BRASS TA	AP,	LLC		SECRETA IALLAHAS	2013 FEB -	temas
XXXX QUALIFICATION (TYPE: LI	<u>다</u>)			TARY OF STATE	-5 PH 12: 35	
PLEASE RETURN THE FOLLOWING AS	PR	OOF OF	FILING:	罗州	35	
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STA	AND:	ING				
CONTACT PERSON: Harry B. Davis	3 -·	- EXT#	2926			

EXAMINER:

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:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. BEEFS BRASS TAP, 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 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.")
D. Common
2. Delaware (Jurisdiction under the law of which foreign limited liability 3. 34-4735335 (FEI number, if applicable)
company is organized)
4. April 9, 2012 5. Perpetual
4. April 9, 2012 (Date of Organization) 5. Per per limited liability company will cease to exist or "perpetual")
6.
(Date first transacted business in Florida, if prior to registration.)
7. SULO W. Cypress St., Suite A
υ, , γ
Tampo, FL 33LD7 (Street Address of Principal Office)
(Street Address of Principal Office)
(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:
FSC Franchise Co., LLC
5000 W. Cypress St., Suite A
Tampa, FL 33607
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 ranslation of the certificate under cath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: Acquaition Company
11-11
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.)
Chad Hope - CFO
Ch-d Hope - CFO 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.

	e of the Limited Liability Cor SS TAP, LLC	npany is:	
If unavailab	le, the alternate to be used in t	the state of Florida is:	
2. The name	e and the Florida street addres	ss of the registered agent and office are:	
	Corporation Service Comp	any	201 SE
	(Name)		
•	1201 Hays Street		-5 (\$8)
	Florida Street Address (P.O. Box NOT ACCEPTABLE)		PM 12: 35 Y OF STATE EE FLORIDY
	Tallahassee	32301 FL	SAL S
		City/State/Zip	- 85
liability com registered ag statutes relat	pany at the place designated in gent and agree to act in this ca ling to the proper and complete digations of my position as reg Corporation Service Compan By:	Harry Co	ntment as provisions of all liar with and
	(Sig	gnature)	
	\$ 100.0 \$ 25.0	0 11	

\$ 30.00 Certified Copy (optional)

5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "BEEFS BRASS TAP, 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 FEBRUARY, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BEEFS BRASS TAP, LLC" WAS FORMED ON THE NINTH DAY OF APRIL, A.D. 2012.

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

2018 FEB - 5 PM 12: 35
SECRE FARY OF STATE
TALL ANASSES FOR STATE

5136934 8300

130129799

AUTHENTYCATION: 0192694

DATE: 02-05-13

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