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CONTACT:	RICKY SO	<u>ro</u>		
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CORP. NAME:	AMBER PL	<u>ATFORM TECHNOLOGIES, LI</u>	ZOIS HAR SECRETAL AHA	
( ) ARTICLES OF INCO ( ) ANNUAL REPORT (XX) FOREIGN QUALIFI ( ) REINSTATEMENT ( ) CERTIFICATE OF C ( ) OTHER:	CATION	( ) ARTICLES OF AMENDMENT ( ) TRADEMARK/SERVICE MARK ( ) LIMITED PARTNERSHIP ( ) MERGER	( ) ARTICLES OF DISSOLUTION ( ) FICTITIOUS NAME ( ) LIMITED LIABILITY ( ) WITHDRAWAL	
		TH CHECK# <u>U3785</u> CCOUNT IF TO BE DEBITE		
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Examiner's Initials

#### **COVER LETTER**

TO:

Registration Section Division of Corporations

Amber Platform Technologies, 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:

Elizabeth A. Cooper	A L
Name of Person	AHX
Frost Brown Todd LLC	SS
Firm/Company	(1)
400 W Market Street, 32nd Floor	
Address	<u>ا</u> ب
Louisville, KY 40202-3363	
City/State and Zip Code	
ecooper@fbtlaw.com	
E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

Elizabeth A. Cooper

,502 \ 568-(

Name of Person

Area Code & Daytime Telephone Number

**MAILING ADDRESS:** 

Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS:

Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

□ \$130.00 Filing Fee & 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:

1. Amber Platform				
(Name of Foreign Limited	Liability Company; must include	e "Limited Liability Company,	""L.L.C.," or "LLC.")	
(If name unavailable, enter altern consent of the managers or managers or managers," "L.L.C," "LLC.")				en
<sub>2.</sub> Delaware	3	27-0253900		
(Jurisdiction under the law of v company is organized)	which foreign limited liability	(FEI number, it	applicable)	
4. 4/30/2009	5	Perpetual	3 <b>5</b>	
(Date of Organi	zation)	(Duration: Year limited lial exist or "perpetual")	oility company will case to	
6. (Date	first transacted business in Flo	ida if prior to registration.)		
(See se	ections 608,501 & 608,502 F.S.	to determine penalty liability)	ST.	
<sub>7.</sub> 4965 U.S. Hwy	42, Suite 1000			
Louisville, KY 4			<del>-</del>	
	(Street Address	of Principal Office)		
8. If limited liability compa	ny is a manager-managed (	company, check here		
9. The name and usual busi	ness addresses of the mana	ging members or manage	rs are as follows:	
Jeff Amrein 496	35 U.S. Hwy 42, S	Suite 1000, Louis	ville, KY 40222	
William Pearse	4965 U.S. Hwy 42	, Suite 1000, Loui	sville, KY 40222	
			- CC 111 1 2 2 2 1 2 C 2 2 2	
<ol> <li>Attached is an original certificate the jurisdiction under the law of warstation of the certificate under the law.</li> </ol>	hich it is organized. (A photocop	y is not acceptable. If the certific	ne official having custody of record ate is in a foreign language, a	15
11. Nature of business or p				
Promotional an	d marketing acti	vities for restaur	ant locations	
	Will mer			
Signa	tyre of a member or an aut	horized representative of	a member.	
(In accordance with	ection 608.408(3), F.S., the excent	tion of this document constitutes	an affirmation under the	
penaltics of perjude document to the	y that the facts stated herein are true Department of State constitutes	e. I am aware that any taise info a third degree felony as provid	ed for in s.817.155, F.S.)	
	Amrein, Manager			

Typed or printed dame 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.

	ne of the Limited Liability Company is: r Platform Technologies, LLC	<u></u>
If unavaila	ble, the alternate to be used in the state of Florida is:	ZOLIS DAN SECRET
2. The nan	ne and the Florida street address of the registered agent and office are:  National Corporate Research, Ltd.	TARY OF STATE
	(Name)	
	155 Office Plaza Drive	<b>P O</b>
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	•
	Tallahassee <sub>FL</sub> 32301	

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.

\$ 100.00 Filing Fee for Application **Designation of Registered Agent** \$ 25.00 Certified Copy (optional) \$ 30.00 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 "AMBER PLATFORM TECHNOLOGIES, 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 SEVENTH DAY OF MARCH, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AMBER PLATFORM TECHNOLOGIES, LLC" WAS FORMED ON THE THIRTIETH DAY OF APRIL, A.D. 2009.

4682346 8300

130286397

DATE: 03-07-13

AUTHENTACATION: 0265335

Jeffrey W. Bullock, Secretary of State

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