

m13000001708

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

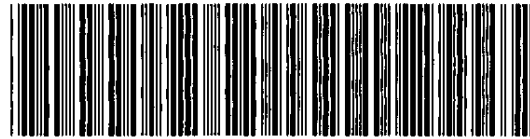
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600273038456

05/20/15--01017--006 **25.00

RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2015 JUN -8 A 10:37

FILED

JUL -9 2015

T SCHROEDER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 21, 2015

JULIE VAN ORMAN
1325 N ANAHEIM BLVD
ANAHEIM, CA 92801

SUBJECT: CARL KARCHER ENTERPRISES LLC
Ref. Number: M13000001708

We have received your document for CARL KARCHER ENTERPRISES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

PLEASE CORRECT ARTICLE #3 TO THE CURRENT JURISDICTION OF THE ORGANIZATION. IF THE JURISDICTION IS CHANGING, PLEASE LIST THE NEW JURISDICTION IN ARTICLE #7.

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Carl Karcher Enterprises LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Julie Van Orman

Name of Person

CKE Restaurants Holdings, Inc.

Firm/Company

1325 N. Anaheim Blvd.

Address

Anaheim, CA 92801

City/State and Zip Code

bruffino@ckr.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Julie Van Orman

Name of Person

at (714) 254-4661

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: Carl Karcher Enterprises LLC

2. The Florida document number of this limited liability company is: M13000001708

3. Jurisdiction of its organization: California ~~DELAWARE~~

4. Date authorized to do business in Florida: March 18, 2013

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: _____
(must contain "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 contain "Limited Liability Company," "L.L.C.," or "LLC.")

6. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida Street Address

_____, **Florida** _____
City Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 relative 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 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

CALIFORNIA

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

Julie J. Orman
Signature of the authorized representative

Julie Van Orman
Typed or printed name of signee

Filing Fee: \$25.00

FILED
2015 JUN -8 A 10:37
STATE OF ARIZONA
COUNTY OF PIMA