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DATE:

5/8/13

NAME:

DICK'S LAST RESORT OF LAKE BUENA VISTA, LLC

TYPE OF FILING: APPLICATION

COST: 125.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

**AUTHORIZATION: ABBIE/PAUL HODGE** 

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			igen. Liveren
CR2E02	027 (9/10)	COVER LETTER	O
TO:	Registration Section Division of Corporations		30
SUBJI	Dick's Last Resort of Lake Buena Vista, JECT; Name	ILC BE	
	Name	of Limited Llability Company	
The en	enclosed "Application by Foreign Limited Liability	by Company for Authorization to Transact Business in Florida," Certificate of we referenced foreign limited liability company to transact business in Florida	
Please	e return all correspondence concerning this matter	r to the following:	
	Mr. Ralph W. McCracken		
		Name of Person	
	Dick's Last Resort of Lake Buena Vi	sta, LLC	
		Firm/Company	
	611 Commerce Street, Suite 2911		
	UNIONE CONTRACTOR CONT	Address	
	Nashville, TN 37203		
	**************************************	City/State and Zip Code	
	rmccracken@dlrmc.com		
	E-mail address: (to b	be used for future annual report notification)	
For fu	urther information concerning this matter, please of	call:	
	Ralph W. McCracken	615 254-5844 at ()	
	Name of Person	Area Code & Daytime Telephone Number	
	Division of Corporations   Registration Section   P.O. Box 6327   Tallahassee, F1, 32314   2	STREET ADDRESS: Division of Corporations Registration Section Clifton Bullding 2661 Executive Center Circle Tallahassee, FL 32301	

□ \$155.00 Filing Fee &

Certified Copy

☐ \$160.00 Filing Fee, Certificate

of Status & Certified Copy

Enclosed is a check for the following amount:
☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee &

Certificate of Status

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPILANCE WITH SECTION 608.503, FLORIDA STATUTES, LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE S	, THE FOLLOWING IS SUBMITTED TO REGISTER A FOR STATE OF TOPIOA	BIGN .
Dick's Last Resort of Lake Buena Vista, LLC	SIMITO OF VANIMAL	
(Name of Poreign Limited Liability Company; must include	"Llimited Liability Company," "L.L.C.," or "LLC.")	
(If name unavailable, enter alternate name adopted for the purpose consent of the managers or managing members adopting the alternate Company," "L.L.C." "LLC.")	of transacting business in Florida and attach a copy of the wrate name. The alternate name must include "Limited Liability	itten
2, Dolaware 3.		•
(Jurisdiction under the law of which foreign limited liability company is organized)	(FBI number, if applicable)	
4. May 3, 2013	Perpetual	
(Date of Organization)	(Duration; Year limited flability company will cease to exist or "perpetual")	
6. Date of Filing		
(Date first transacted business in Ptori (See sections 608,501 & 608,502 F.S. to	da, if prior to registration.) o determine penalty liability)	
7. 611 Commerce Street, Suite 2911	TAGE	
Nashville, TN 37203	AH	
(Street Address of	Principal Office)	00
8. If limited liability company is a manager-managed co	ompany, check here	聖
9. The name and usual business addresses of the manag	ling members or managers are as follows:	أ م
DLR Restaurants, LLC, 611 Commerce Street, Suite 2911, Na	71.72.	20
	3	
***************************************		
10. Attached is an original certificate of existence, no more than 90 dathe jurisdiction under the law of which it is organized. (A photocopy translation of the certificate under each of the translator must be subm	risnot acceptable. If the certificate is in a foreign language, a	ords in
11. Nature of business or purposes to be conducted or p	promoted in Florida:	
own and operate restaurant		
Signature of thember or an auth	orized representative of a member.	
	fon of this document constitutes an affirmation under the	
ponalties of perjury that the facts stated herein are true.	I am aware that any false information submitted in a third degree felony as provided for in s.817.155, F.S.)	
Ralph W. McCracken	many megico iciony as provided fat in 8.817,155, r.S.)	
Typed or printed n	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.

	of the Limited Liability sort of Lake Buena Vista, LL	• •	
If unavailable	e, the alternate to be used	d in the state of Florida is:	
2. The name		Idress of the registered agent and office are:	
	NRAI Services, Inc.	(Name)	******
	1200 South Pinc Island F	Cond rect Address (P.O. Box NOT ACCEPTABLE)	•
	Plantation	20204	
	* 14/1/4/1011	FL 33324	

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.

NRAI Services, Inc.

By: Silleen Chaddock, Asst. Secretary

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

# Delaware

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#### The First State

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

DELAWARE, DO HEREBY CERTIFY "DICK'S LAST RESORT OF LAKE BUENA

VISTA, 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

MAY, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DICK'S LAST RESORT OF LAKE BUENA VISTA, LLC" WAS FORMED ON THE THIRD DAY OF MAY, A.D. 2013.

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

5329072 8300

130536180

AUTHENT CATION: 0412467

DATE: 05-07-13

You may vorify this certificate online