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DEPARTMENT OF STATE

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MAR 2 6 2013 T. **HAMPTON**



ACCOUNT NO. : 12000000195 REFERENCE : , 068897. 7828686 AUTHORIZATION COST LIMIT : \$ 160.00 ORDER DATE: March 24, 2014 ORDER TIME : 12:32 PM ORDER NO. : 068897-005 CUSTOMER NO: 7828686 FOREIGN FILINGS NAME: FIFTH DINING, LLC XXXX QUALIFICATION (TYPE: LL) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: XX CERTIFIED COPY PLAIN STAMPED COPY XX CERTIFICATE OF GOOD STANDING CONTACT PERSON: Susie Knight -- EXT# 52956

EXAMINER:

COVER LETTER

TO:

TO:	Registration Section Division of Corporations
SUBJE	T: Fifth Dining, LLC. Name of Limited Liability Company
The end Existen	used "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.
Please	turn all correspondence concerning this matter to the following:
	Angela Sloan
	Name of Person
	Centerplate
	Firm/Company
	1 Independence Pt Ste 305
	Address
	Greenville, SC 29615
	City/State and Zip Code
	angela.sloan@centerplate.com
	E-mail address: (to be used for future annual report notification)
For fun	er information concerning this matter, please call:
	Angela Sloan at 864 248-2011
	Name of Contact Person Area Code Daytime Telephone Number
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 MAILING ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclo	ed is a check for the following amount: \$125.00 Filing Fee

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

L Fifth Dining, LLC.	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "	(LC")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate nam Liability Company," "L.L.C." or "LLC.")	e must include "Limited
₂ Delaware 3 46-0839382	
(Jurisdiction under the law of which foreign limited liability (FEI, number, if applicable company is organized)	le)
4.	
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	201 SI TAI
1 Independence Pt Ste 305	2014 MAR SECRETATALLAHA
Greenville, SC 29615	R 25
(Street Address of Principal Office) 1 Independence Pt Ste 305	R 25 AN
Y	
Greenville, SC 29615	三芸芸 李
(Mailing Address)	2
7. The name, title or capacity and address of the person(s) who has/have authority to mar	nage is/are:
dichael S. Kaufman - President - 2187 Atlantic St, Stamford, CT 06902	
Desmond G. Hague - CEO - 2187 Atlantic St, Stamford, CT 06902	
Hadi K. Monavar - CFO - 2187 Atlantic St, Stamford, CT 06902	
Keith B.W. King - Chief Legal Officer, Corp Secretary - 2187 Atlantic St, Stamford, CT 06902	described to the second
8. Attached is an original certificate of existence, no more than 90 days old, duly authentic having custody of records in the jurisdiction under the law of which it is organized. (A phaacceptable. If the certificate is in a foreign language a translation of the certificate under comust be submitted)	otocopy is not
Signature of an authorized person (In accordance with section 603.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury the am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided	at the facts stated herein are true, for in \$.817.155, F.S.)
Hadi K. Monavar	_
Typed or printed name of signed	-

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605,0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

Fifth Dini	f the Limited Liability Comping, LLC.	jany is:	
If unavailable, t	the alternate to be used in th	e state of Florida is:	
2. The name an	nd the Florida street address	of the registered agent and office are:	Type
	Corporation Se	rvice Company	
		(Name)	_
	1201 Hays Stre	et	
Florida Street Address (P.O. Box NOT ACCEPTABLE)			~
	Tallahassee	32301 FL	_
		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 605, Florida Statutes.

Sue G. Knight

Assistant Vice President

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional) 114 HAR 25 AM 10: 55

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "FIFTH DINING, 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 TWENTY-FOURTH DAY OF MARCH, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FIFTH DINING, LLC" WAS FORMED ON THE ELEVENTH DAY OF MAY, A.D. 2012.

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

5153483 8300

140372938

AUTHENTY CATION: 1234561

DATE: 03-24-14

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