| (Re | equestor's Name) | |
|-------------------------|--------------------|-------------|
| (Ac | ldress) | |
| (Ac | ldress) | |
| (Ci | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Ві | ısiness Entity Nar | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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03/20/18--01025--027 **25.00

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COVER LETTER

| TO: Registration Section Division of Corporations | |
|---|--|
| SUBJECT: R&B Oviedo Restaura | ant, LLC imited Liability Company |
| Name of Foreign L | inited Etablity Company |
| Dear Sir or Madam: | |
| The enclosed application, certificate and fee(s) are | submitted for filing. |
| Please return all correspondence concerning this m | atter to the following: |
| Tammy Kirby | |
| Name of Person | |
| Tradecor, LLC | |
| Firm/Company | |
| 4455 E Camelback Rd, Suite | E-180 |
| Address | |
| Phoenix, Arizona 85018 | |
| City/State and Zip Code | |
| tammy.kirby@tradecorllc.com | า |
| E-mail address: (to be used for future annual rep | |
| For firsthon information or a subject to the | |
| For further information concerning this matter, ple | |
| David L. Lansky | 480 822-6755 |
| Name of Person | Area Code & Daytime Telephone Number |
| STREET/COURIER ADDRESS: | MAILING ADDRESS: |
| Registration Section | Registration Section |
| Division of Corporations Clifton Building | Division of Corporations P.O. Box 6327 |
| 2661 Executive Center Circle | Tallahassee, Florida 32314 |
| Tallahassee, Florida 32301 | Tallallassee, Florida 52514 |
| Enclosed is a check for the following amount: | |
| \$25 Filing Fee \$30 Filing Fee & Certificate of Status | S55 Filing Fee & S60 Filing Fee, Certified Copy Certificate of Status & Certified Copy |
| CR2E055 (9/15) | Continua 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)

| Name of limited liability Company as it appear State: R&B Oviedo Restaurant, Li | | |
|--|--|---------------------|
| Enter new principal office address, if applicable: | | ps. |
| (Principal office address | 4455 E Camelback Rd, Suite E-180 | - |
| MUST BE A STREET ADDRESS | Phoenix, Arizona 85018 | - - |
| Enter new mailing address, if applicable: | 4455 E Camelback Rd, Suite E-180 | |
| (<u>Mailing address</u> <u>MAY BE A POST OFFICE BOX</u>) | Phoenix, Arizona 85018 | - |
| | | - |
| 2. The Florida document number of this limited lia | bility company is: M1400002798 | |
| 3. Jurisdiction of its organization: Arizona | | |
| 4. Date authorized to do business in Florida: Api | ril 24, 2014 | - |
| SECTION II (5-9 complete only the applicable of | changes) | |
| New name of the limited liability company: (must | contain "Limited Liability Company," "L.L.C.," or "LLC." | ·) |
| (If name unavailable, enter alternate name adopted copy of the written consent of the managers or man must contain "Limited Liability Company," "L.L.C | for the purpose of transacting business in Florida and attach aging members adopting the alternate name. The alternate name." or "LLC.") | a ame |
| 6. If amending the registered agent and/or registered registered agent and/or the new registered office ad | d officer address on our records, <u>enter the name of the new</u> dress here: | SECRET IVISION C |
| Name of New Registered Agent: | | TAR SP C |
| New Registered Office Address: | | سارت |
| | Enter Florida Street Address | RPORT |
| - | City , Florida Zip Code | RAI PO |
| the provisions of all statutes relative to the proper and accept the obligations of my position as registe | istered Agent: t and agree to act in this capacity. I further agree to comply and complete performance of my duties, and I am familiar w red agent as provided for in Chapter 605, F.S. Or, if this n the registered office address, I hereby confirm that the lim | with ith |

If Changing Registered Agent, Signature of New Registered Agent

| 8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change: | | | | |
|---|---------------------------------------|---|----------------|--|
| itle/ Capacity | Name | Address | Type of Action | |
| | | | Add | |
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| aforementioned an | the law of which this entity is organ | the official having custody of records in the | 18 MAR 20 / | |
| | Typed or print | Ma/A ed name of signee | AT Ç | |

Filing Fee: \$25.00

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "R&B OVIEDO RESTAURANT, 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 THIRTEENTH DAY OF MARCH, A.D. 2018.

Authentication: 202314291

Date: 03-13-18