

71400002963

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☒ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

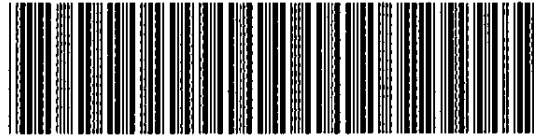
(Document Number)

Certified Copies _____ Certificates of Status _____

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04/10/14--01014--015 **155.00

FILED
2014 APR 30 AM 9:29
TALLAHASSEE, FLORIDA
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014-23111

CORP DIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-23

CONTACT: SAVANNAH DEBOER

DATE: 04/10/14

REF. #: 7749706.9110062

CORP. NAME: DICK'S LAST RESORT OF I-DRIVE ORLANDO, LLC

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TALLAHASSEE, FLORIDA

- | | | |
|---|---|--|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input checked="" type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input type="checkbox"/> OTHER: | | |

STATE FEES PREPAID WITH CHECK# 70010343 FOR \$ 155.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ COST LIMIT: \$ _____

PLEASE RETURN:

- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 11, 2014

CORPDIRECT AGENTS, INC.

TALLAHASSEE, FL

SUBJECT: DICK'S LAST RESORT OF I-DRIVE ORLANDO, LLC
Ref. Number: W14000023111

PLEASE GIVE ORIGINAL SUBMISSION
DATE AS FILE DATE
04/10/14

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2014 APR 10 AM 9:29

We have received your document for DICK'S LAST RESORT OF I-DRIVE ORLANDO, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s).

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Teresa Brown
Regulatory Specialist II

Letter Number: 714A00007817

PLEASE GIVE ORIGINAL SUBMISSION
DATE AS FILE DATE
04/10/14

PLEASE GIVE ORIGINAL SUBMISSION
DATE AS FILE DATE
04/10/14



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 30, 2014

CORPDIRECT AGENTS, INC.

TALLAHASSEE, FL

SUBJECT: DICK'S LAST RESORT OF I-DRIVE ORLANDO, LLC
Ref. Number: W14000023111

PLEASE GIVE ORIGINAL SUBMISSION
DATE AS FILE DATE
04/10/14

We have received your document for DICK'S LAST RESORT OF I-DRIVE ORLANDO, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Agnes Lunt
Regulatory Specialist II

Letter Number: 714A00009157

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2014 APR 10 AM 9:29

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TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS

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14 APR 30 PM 2:44

PLEASE GIVE ORIGINAL SUBMISSION
DATE AS FILE DATE
04/10/14

PLEASE GIVE ORIGINAL SUBMISSION
DATE AS FILE DATE
04/10/14

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Dick's Last Resort of I-Drive Orlando, 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:

Mr. Ralph W. McCracken

Name of Person

Dick's Last Resort of I-Drive Orlando, LLC

Firm/Company

611 Commerce Street, Suite 2911

Address

Nashville, TN 37203

City/State and Zip Code

rmccracken@dlrmc.com

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

For further information concerning this matter, please call:

Ralph W. McCracken

at (615)

254-5844

Name of Contact 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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 APR 10 AM 9:29

FILED

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

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

1. Dick's Last Resort of I-Drive Orlando, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Delaware 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

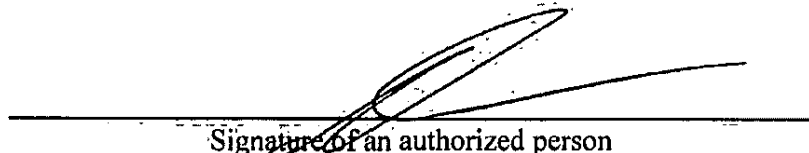
4. Date of Filing
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 611 Commerce Street, Suite 2911
Nashville, TN 37203
(Street Address of Principal Office)

6. 611 Commerce Street, Suite 2911
Nashville, TN 37203
(Mailing Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
Ralph W. McCracken, Authorized Representative, 611 Commerce Street, Suite 2911, Nashville, Tennessee 37203

8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)



Signature of an authorized person

(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Ralph W. McCracken

Typed or printed name of signee

FILED
2014 APR 10 AM 9:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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.

1. The name of the Limited Liability Company is:

Dick's Last Resort of I-Drive Orlando, LLC

If unavailable, the alternate to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

NRAI Services, Inc.

(Name)

1200 South Pine Island Road

Florida Street Address (P.O. Box NOT ACCEPTABLE)

Plantation

FL 33324

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.

NRAI Services, Inc.
By: Katie Wonsch, Asst. Secretary

(Signature)

Katie Wonsch

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

2014 APR 10 AM 9:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DICK'S LAST RESORT OF I-DRIVE ORLANDO, 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 APRIL, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DICK'S LAST RESORT OF I-DRIVE ORLANDO, LLC" WAS FORMED ON THE SEVENTEENTH DAY OF JUNE, A.D. 2013.


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

5352125 8300

140439158

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




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 1273382

DATE: 04-07-14