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T. BROWN

#### COVER LETTER

TO:

Registration Section
Division of Corporations

# SUBJECT: NOLA BRUNCH CONCEPTS, L.L.C.

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:

# DAVID ALLEN BURLESON, JR.

Name of Person

# NOLA BRUNCH CONCEPTS, L.L.C.

Firm/Company

### 4201 INDIAN BAYOU TRAIL

Address

DESTIN, FL 32541

City/State and Zip Code

# CHIPSSPORTSBAR@GMAIL.COM

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

For further information concerning this matter, please call:

#### DAVID ALLEN BURLESON, JR.

.337

351-6943

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



June 9, 2014

DAVID ALLEN BURLESON, JR. NOLA BRUNCH CONCEPTS, L.L.C. 4201 INDIAN BQYOU TRAIL DESTIN, FL 32541

SUBJECT: NOLA BRUNCH CONCEPTS, L.L.C.

Ref. Number: W14000035591

We have received your document for NOLA BRUNCH CONCEPTS, L.L.C. and your check(s) totaling \$160.00. 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), AuthorizedPerson (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: 114A00012353

# 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:

FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUS	INESS IN THE STATE OF FLORIDA:
1 NOLA BRUNCH CONCEPTS, L.L.C.	
(Name of Foreign Limited Liability Company; must include "I	.imited Liability Company," "L.L.C.," or "LLC.")
BRICK AND SPOON - FLORIDA, L.L.C.	
(If name unavailable, enter alternate name adopted for the purpose of transactiability Company," "L.L.C," or "LLC.")	ting business in Florida. The alternate name must include "Limited
2. LOUISIANA 3. 4	46-4716388
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4. 06-01-2014	
(Date first transacted business in Flori (See sections 605,0904 & 605,0905, F.S.	da, if prior to registration.) to determine penalty liability)
5. 4201 INDIAN BAYOU TRAIL	
DESTIN, FL 32541	HASS
6. 4201 INDIAN BAYOU TRAIL	PS =
DESTIN, FL 32541	DRIDA DRIDA
(Mailing Ac	ldress)
7. The name, title or capacity and address of the person(	s) who has/have authority to manage is/are:
DAVID ALLEN BURLESON, JR.; MEMBER MANAGER	•
DAVID ALLEN BURLESON, SR.; MEMBER; 4844 I-49 N. Si	ERVICE RD., UNIT 5(A) OPELOUSAS, LA 70570
KEVIN MARC CARRIER; MEMBER; 702 ME	GHAN DR. OPELOUSAS, LA 70570
JUSTIN SAMUEL SMITH: MEMBER: 400 SEYCH	
8. Attached is an original certificate of existence, no more having custody of records in the jurisdiction under the law acceptable. If the certificate is in a foreign language, a trainmust be submitted)	than 90 days old, duly authenticated by the official of which it is organized. (A photocopy is not
C	Al animal margan
Signature of an au (In accordance with section 605.0203, F.S., the execution of this document constitutes am aware that any false information submitted in a document to the Department of St.	s an affirmation under the penalties of perjury that the facts stated herein are true. I

DAVID ALLEN BURLESON, JR.

Typed or printed name of signee

# 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 L	imited	Liability	Company	is:
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## NOLA BRUNCH CONCEPTS, L.L.C.

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

## BRICK AND SPOON - FLORIDA, L.L.C.

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

DAVID ALLE	EN BURLESON, JR.	
	(Name)	
4201 INDIAN	I BAYOU TRAIL	
Florida Street Address (P.O. Box NOT ACCEPTABLE)		
DESTIN	32541	
	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.

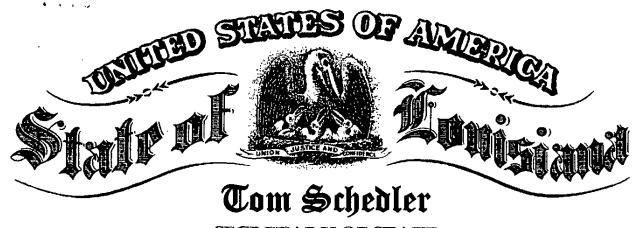
(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)



SECRETARY OF STATE

As Secretary of State of the State of Louisiana I do hereby Certify that

the Articles of Organization of

#### **NOLA BRUNCH CONCEPTS, L.L.C.**

Domiciled at NEW ORLEANS, LOUISIANA,

Were filed in this Office and a Certificate of Organization was issued on January 27, 2014,

I further certify that no Certificate of Dissolution has been issued.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

May 29, 2014

OF LOUIS TO A LOUIS TO

Certificate ID: 10495312#Q8E52

To validate this certificate, visit the following web site, go to Commercial Division, Certificate Validation, then follow the instructions displayed.

www.sos.louisiana.gov

Secretary of State

Web 41415986K