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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

(Business Entity Name)

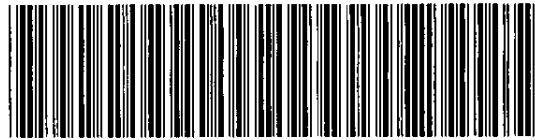
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W16-33462 Previously filed

Office Use Only



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05/03/16--01027--030 **125.00

16 MAY 18 PM 12:03
RECEIVED
TALLAHASSEE, FLORIDA

MAY 20 2016
J SHIVERS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 6, 2016

VANESSA SWEENEY
MONGOLIAN OPERATING CO LLC
200 E TRAVELERS TRAIL
BURNSVILLE, MI 55337

SUBJECT: MONGOLIAN OPERATING CO LLC
Ref. Number: W16000033462

We have received your document for MONGOLIAN OPERATING CO LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

This document was previously filed on April 11, 2016.

To receive a refund, please submit a signed written request to the attention of the undersigned. Be sure to include the name of the person or entity the check should be made payable to and the address to which it should be mailed. You may mail the request to: Division of Corporations, P. O. Box 6327, Tallahassee, FL 32314 or fax it to my attention at 850-245-6030

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.

Karen A Saly
Regulatory Specialist II

Letter Number: 516A00009586



May 16, 2016


Florida Dept of State

To Karen Saly,

Per our phone conversation, please see attached documents. The Mongolian Operating Co LLC document # L16000071647 was filed incorrectly. I have dissolved so I could file the Foreign Qualification.

Thank you for all your help!

Sincerely,


Vanessa Sweeney, Controller
Mongolian Operating Company
200 East Travelers Trail
Burnsville MN 55337
952-288-5912

RECEIVED
2016 MAY 17 PM 1:46
TALLAHASSEE, FLORIDA

RECEIVED
16 MAY 18 PM 12:08
TALLAHASSEE, FLORIDA

bd's Mongolian Grill

12261 Nicollet Avenue South • Burnsville, Minnesota 55337 • 952.288.2300 (Phone) • 952.288.2310 (Fax)

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MONGOLIAN OPERATING CO, 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:

VANESSA Sweeney
Name of Person

MONGOLIAN OPERATING CO LLC
Firm/Company

200 E. TRAVELERS TRAIL - Suite 235
Address

BURNSVILLE MN 55337
City/State and Zip Code

VSweeney@GOMONGO.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

VANESSA Sweeney at (952) 288-5912
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

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:

1. MONGOLIAN OPERATING COMPANY, 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. MICHIGAN 3. 38-3411841
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 5-09-16
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 1474 TOWN CENTER DRIVE
LAKELAND FLORIDA 33803
(Street Address of Principal Office)

6. 200 E. TRAILBLAZERS TRAIL STE 235
BURNSVILLE MN 55337
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: LAURIE LOCKARD
Office Address: 14199 SANDHURST STREET
BROOKSVILLE, Florida 34613
(City) (Zip code)

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Laurie Lockard
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

LAURIE LOCKARD GENERAL MANAGER
14199 SANDHURST STREET
BROOKSVILLE FL 34613

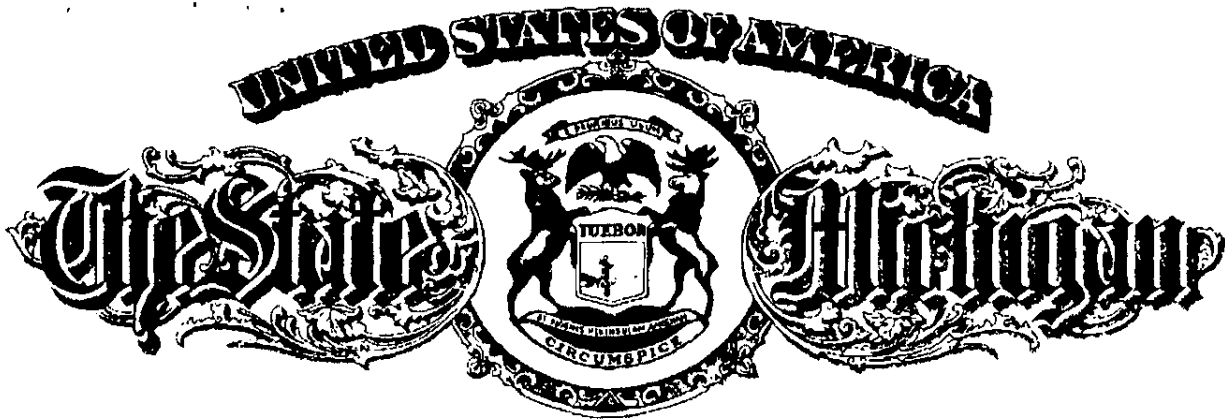
9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

[Signature]
Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

ANASSA SWEENEY
Typed or printed name of signer

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 MAY 18 PM 12:08
4630



Department of Licensing and Regulatory Affairs
Lansing, Michigan

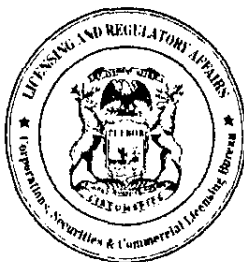
This is to Certify That

MONGOLIAN OPERATING COMPANY, LLC

was validly organized on May 13, 1998 as a Limited Liability Company. Said Limited Liability Company is validly in existence under the laws of this state and has satisfied its annual filing obligations

This certificate is issued pursuant to the provisions of 1993 PA 23, as amended, to attest to the fact that the company is in good standing in Michigan as of this date.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.



Sent by Facsimile Transmission
1384168

*In testimony whereof, I have hereunto set my hand,
in the City of Lansing, this 16th day of May, 2016*

Julia Dale

Julia Dale, Director
Corporations, Securities & Commercial Licensing Bureau