Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000249230 3)))



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To:

TRANS#869080

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : 120160000017

Phone : (800)345-4647

Fax Number

: (800)432-3622

Enter the email address for this business entity to be used for futurp annual report mailings. Enter only one email address please.

Email Address:

Foreign Limited Liability Company HAPPY TIMES, LLC d/b/a HAPPY TIMES FL, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

TO: Registration Section Division of Corporations

COVER LETTER

SUBJECT:		py Times, LLC							
DODE NO.		Name of Limited Liability Company							
The enclosed Existence, as	d "App nd che	plication by Fore	ign Limited Liability Comp to register the above refere	any for Authoriza nced foreign limi	ation (ited li	to Trans ability c	act Business in Florida," Company to transact busines	ertificate of s in Florids	
Please return	all co	orrespondence co	oncerning this matter to the	following:					
		David Jackson							
	Name of Person								
		Otter Inspiratio	ns, LLC						
	Firm/Company								
		1200 North Federal Hwy, Sulte 411							
	Address								
	Boca Raton, FL 33432								
	City/State and Zip Codc								
	đ	avidj@otteroon	•						
			E-mail address: (to be used	for future annua	l repo	rt notifi	cation)		
For further is	nform	ation concerning	this matter, please call:						
K	im y	Weidenbac	h	at { 800 _	.)	345-	4647	•	
		Name of	Contact Person	Area Code	,	Daytin	ne 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						
		k for the following Fee	ng amount: \$130,00 Filing Fee & Certificate of Status	S155.00 Filia Certified Copy			5160.00 Filing Fee, Certion of Status & Certified Copy	ifica te	

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: Happy Times, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company,, "L.L.C., or "L.L.C., Happy Times FL, (If name unavailable, cuter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company,, "L.L.C., or "LL.C.,) 2. Delaware 3. 36-4848314 (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 1200 North Federal Hwy, Suite 411 Boca Raton, FL 33432 (Street Address of Principal Office) 1200 North Federal Hwy, Suite 411 Boca Raton, FL 33432 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Eric Seid Name: 1200 North Federal Hwy, Suite 411 Office Address: **Boca Raton** (City) 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 complywith 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. (Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are; Manager: Tara Louisiana Group, Inc., 1200 North Federal Hwy, Sulte 411, Boca Raton, FL 33432 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 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.

L. Alexander, as President of Tara Louisiana Group, Inc. (MGR)

Typed or printed name of signee

<u>Delaware</u>

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
UELAWARE, DO HEREBY CERTIFY "HAPPY TIMES, 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 SIXTH DAY OF OCTOBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HAPPY TIMES, LLC" WAS FORMED ON THE TWENTY-SECOND DAY OF SEPTEMBER, A.D. 2016.

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

6160763 8300

SR# 20166092436

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

Authentication: 203117610

Date: 10-06-16