M/7000038

(Ke	equestor's Name)	,		
(Ad	ldress)			
(Address)				
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	MAIT	MAIL		
(Bi	ısiness Entity Nar	me)		
(50	iomooo Emiry man			
(D-				
(DC	ocument Number)			
Certified Copies Certificates of Status				
Special Instructions to	Filing Officer:			

Office Use Only



000293670670

01/09/17--01036--002 **125.00

JAN 11 2017 S. YOUNG 17 JAN -9 PH 4: 31

SECRETMRY OF STATE



jgorski@smdklaw.com

January 6, 2017

BY FEDERAL EXPRESS

Florida Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Re: Burntwood Tavern Naples LLC

Application for Florida Qualification

Dear Sir or Madam:

Enclosed please find an Application by Foreign LLC for Authorization to Transact Business in Florida in respect of Burntwood Tavern Naples LLC, an Ohio limited liability company, along with the Cover Letter, Certificate of Full Force and Effect issued by the Ohio Secretary of State, and a check in the amount of \$125 made payable to the Florida Division of Corporations. Please file the Application as soon as possible and return evidence of filing to my attention.

Should you have any questions on this matter, please feel free to call me.

Sincerely,

Jeffrey A. Gorski

JAG/encls.

cc: Joseph Marino

COVER LETTER

and there	Burntwood Tavem	Naples I.I.C			
SUBJECT:	Name of Limited Liability Company				
The enclosed Existence, an	"Application by For d check are submitte	reign Limited Liability Comp id to register the above refere	any for Authorizatio need foreign limited	on to Transact Business in Florida," Certificate Highlity company to transact business in Floric	
Please return	all correspondence o	concerning this matter to the	following:		
	Joseph Manno				
	Name of Person				
	Burntwood Tin	vern Naples LLC			
	Firm/Company				
	12 West Orange Street				
	Address				
	Chagrin Falls,	Ohio 44022		,	
		City/S	tate and Zip Code	makeringen om geginner. I dies per den gestraktieks 1 om mote andersogsforte verdigt og grupp den delste skrive til de A. skylder	
	jor@chefartpou				
	and the state of t	E-mail address: (to be used	t for future unnual r	eport antification)	
For further in	nformation concernic	ng this matter, please call:			
Jose	eph Marino		440 _ at (247-3030 Daytime Telephone Number	
	Name	of Contact Person	Area Code	Daytime Telephone Number	
Div Reg P.O	iking ADDRESS ision of Corporation distration Section Box 6327 lahassee, FL 32314			STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
	a check for the follow 1125.00 Filing Fee	ving amount: ☐ \$130,00 Filing Fee & Certificate of Status	S155,00 Filing	Fee & D \$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: Burntwood Tavern Naples 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.") S1-4867535 (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) 12 West Orange Street Chagrin Falls, Ohio 44022 (Street Address of Principal Office) 12 West Orange Street Chagrin Falls, Ohio 44022 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) CT Corporation System Name: 1200 South Pine Island Road Office Address: Plantation, Florida · (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 dulies, and I am familiar with and accept the obligations of my positi 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Bret J. Adams, Manager 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

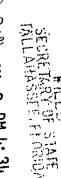
Typed or printed name of signer

Bret J. Adams

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.

UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show BURNTWOOD TAVERN NAPLES LLC, an Ohio For Profit Limited Liability Company, Registration Number 3969979, was organized within the State of Ohio on December 15, 2016, is currently in FULL FORCE AND EFFECT upon the records of this office.





Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 6th day of January, A.D. 2017.

Ohio Secretary of State

Jan Hastel

Validation Number: 201700601288