Mnoodad8

(Re	equestor's Name)	
(Ac	ddress)	
•	•	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Nan	ne)
(De	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
·		

Office Use Only



200296389782

03/03/17--01011--029 **130.00

T MAR -8 PM 4: 15

MAR 0 9 2017 S. YOUNG

COVER LETTER

TO:	Registration Section. Division of Corporatio	ns			
etini	ecr.	FRG	C MAN	VAGENENT LLC	
SUBJ	ECT:	Name of	Limited Liability Co	nipany	•
				on to Transact Business in Florida, I liability company to transact busin	
Please	return all correspondence	concerning this matter to the	following:		
		<i>LE621</i> C N	Kim (ame of Person		-
		Fox Re	STAURANT	CONCEPTS	
		F	irm/Company	CONCEPTS	•
		44 55	E. CAMEL.	BACK BIOD	
			Address	BACK, BIOD	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
		PHOEN	VX, AZ SS State and Zip Code	<i>3/8</i>	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		City/S	State and Zip Code		7
		KLOOPE	-REFOX	RC. NET	8 5 5 5
		E-mail address: (to be used	d for future annual re	eport notification)	3
For fur	ther information concerning	ng this matter, please call:			HAR -8 PM 4: 15
	LEE	21E Kim	_at (_486)	905-6920 Daytime Telephone Number	_
	Name	of Contact Person	Area Code	Daytime Telephone Number	•
	MAILING ADDRESS: Division of Corporation Registration Section P.O. Box 6327 Tallahassee, Fl. 32314		Г С 2	TREET ADDRESS: Division of Corporations Registration Section Clifton Building 661 Executive Center Circle Callahassee, FL 32301	
Enclos	ed is a check for the follov ☐ \$125.00 Filing Fee	ving amount: \$\int\$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Certified Copy	Fee & ☐ \$160.00 Filing Fee, C of Status & Certified Co	

$\label{limited} \begin{array}{c} \text{APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS} \\ \text{IN FLORIDA} \end{array}$

	ION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY SINESS IN THE STATE OF FLORIDA:
	FRC: MANAGEMENT LLC gn Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L.C.")
(Name of Folia)	an manned Mathiry Company, must include Limited Mathiry Company, L.E.C., or LEC.)
f name unavailable, enter alte ability Company," "L.L.C," o	ernate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited or "L.C.")
ARIZONA	f which foreign limited liability 3. W/A (FEI number, if applicable)
(Jurisdiction under the law of company is organized)	f which foreign limited liability (FEI number, if applicable)
	(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
4455 E.	Comment to 1
24	1 - 12
- noch y	(Street Address of Principal Office)
	(Street Address of Principal Office)
	(Mailing Address) of Florida registered agent: (P.O. Box NOT acceptable)
Name and street address of	of Florida registered agent: (P.O. Box NOT acceptable)
	CT Corporation System
	1200 South Pine Island Road
	Plantation, Florida 38324
_	(City) (Zip sode)
egistered agent's acceptan	nce: stered agent and to accept service of process for the above stated limited liability company at the place
signated in this applicatio	m, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree
complywith the provisions	s of all statutes relative to the proper and complete performance of my daties, and I am familiar with an position as registered agent
cept the obligations of my	Assistant Secretary
_	(Registered agent's signature)
ma	
	ty and address of the person(s) who has/have authority to manage is/are:
	Am Fox - manager
44	65 E. Comelballe Road, BIOD
γ-	moenix, Az 850\$8
Attached is a certificate of	existence, no more than 90 days old, duly authenticated by the official having custody of records in the
isdiction under the law of	which it is org
the translator must be sub-	nitted)
	Signature of an audifized person
	a accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information are Department of State constitutes a third degree felony as provided for in s.817.155, F.S.
	SAM FOY, Manager Typed or printed name of signee
	Typed or printed name of signee





Office of the CORPORATION COMMISSION

CERTIFICATE OF GOOD STANDING

To all to whom these presents shall come, greeting:

I, Ted Vogt, Executive Director of the Arizona Corporation Commission, do hereby certify that

FRC MANAGEMENT LLC

a domestic limited liability company organized under the laws of the State of Arizona, did organize on the 28th day of December 1999.

I further certify that according to the records of the Arizona Corporation Commission, as of the date set forth hereunder, the said limited liability company is not administratively dissolved for failure to comply with the provisions of A.R.S. section 29-601 et seq., the Arizona Limited Liability Company Act; and that the said limited liability company has not filed Articles of Termination as of the date of this certificate.

This certificate relates only to the legal existence of the above named entity as of the date issued. This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the entity's condition or business activities and practices.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the official seal of the Arizona Corporation Commission. Done at Phoenix, the Capital, this 6th day of March, 2017, A. D.



Ted Vogt , Executive Director

.... 1611180

