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SECRETARY OF STATE ALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section Division of Corporatio	ns			
SUBJECT: COL MONT	- RESTAURAN	IT GROUP LLC	_	
	Name of	Limited Liability Company	<u> </u>	
The enclosed "Application by Fo Existence, and check are submitted	reign Limited Liability Com ed to register the above refer	pany for Authorization to Treenced foreign limited liabilit	ansact Business in Florida," Certificate of y company to transact business in Florida.	
Please return all correspondence	concerning this matter to the	following:		
_ANNA	FINK CPA			
- ,	N	ame of Person	· · · · · · · · · · · · · · · · · · ·	
ELLIS	E ASSOCIATE	S PA.		
ANNA FINK CPA Name of Person ELLIS E ASSOCIATES PA. Firm/Company				
8336	RELAIR RA			
<u></u>	BELAIR RD	Address		
PHLITM	ORE, MD City/S	tate and Zip Code		
AFINK	O CPA ELLIS E-mail address: (to be used	d for future annual report no	tification)	
For further information concerning	g this matter, please call:			
ANNA FINK Name o	of Contact Person	at (<u>410</u>) 256 Area Code Day	- 92 98 rtime Telephone Number	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		Division Registrat Clifton B 2661 Exe	of Corporations ion Section building coutive Center Circle see, FL 32301	
Enclosed is a check for the follow ☐ \$125.00 Filing Fee	ring amount: \$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. COLMONT RESTAURANT GROUP 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," "LLC," or "LLC," sich foreign Imsted liability company is organized) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) ANTHONY DIGANGE 444 WEST COLLECT AND Office Address: TALLA4ASEE , Florida 32301
(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. 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Title or Capacity: Name and Address: Title or Capacity: Name and Address: VP OPERATIONS (Use attachments if necessary) 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) 10. 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.

STATE OF MARYLAND Department of Assessments and Taxation

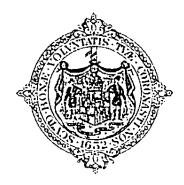
I, MICHAEL L. HIGGS OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO LIMITED LIABILITY COMPANIES, OR THE RIGHTS OF LIMITED LIABILITY COMPANIES. TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT COLMONT RESTAURANT GROUP, LLC (W16315889), REGISTERED JANUARY 27, 2015, IS A LIMITED LIABILITY COMPANY EXISTING UNDER AND BY VIRTUE OF THE LAWS OF THE STATE OF MARYLAND, AND THAT THE LIMITED LIABILITY COMPANY IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING TO TRANSACT BUSINESS.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS JULY 31, 2017.

Michael L. Higgs

Director



301 West Preston Street, Baltimore, Maryland 21201 Telephone Balto. Metro (410) 767-1340 / Outside Balto. Metro (888) 246-5941 MRS (Maryland Relay Service) (800) 735-2258 TT/Voice